

# CONFIDENTIAL EMPLOYEE HISTORY

EMPLOYEE NAME <i>Barnes, James K.</i>		EMPLOYMENT DATE <i>9/27/83</i>	STATUS <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> PART TIME <input type="checkbox"/> TEMPORARY
YEARS OF SERVICE	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26	SECURITY CLEARANCE	LEVEL DATE GRANTED

## PAYROLL DATA

BIRTHDATE <i>12/5/52</i>	SEX <i>M</i>	SOCIAL SECURITY NO. <i>420-76-7898</i>	MARITAL STATUS <i>S M</i> <i>7-3-90</i>	NAME OF SPOUSE <i>N/A Edna R. Barnes</i>	NO. OF CHILDREN <i>1</i>
FEDERAL WITHHOLDING:	EXEMPTIONS CLAIMED				
	ADDITIONAL AMOUNT WITHHELD				

UNION STATUS	DATE ELIGIBLE <i>9/27/83</i>	DATE JOINED	DATE WITHDRAWN	INSURANCE	DATE ELIGIBLE	DATE JOINED	DATE WITHDRAWN
PENSION PLAN	<i>9/27/83</i>	<i>9/27/83</i>		LIFE	<i>9/27/83</i>	<i>9/27/83</i>	
CREDIT UNION	<i>9/27/83</i>			MEDICAL - SELF	<i>9/27/83</i>	<i>9/27/83</i>	
				DEP.			
				MAJ. MED. - SELF	<i>9/27/83</i>	<i>9/27/83</i>	
				DEP.			

## GENERAL INFORMATION

ADDRESS <i>1049 Largo Lane</i>	CITY <i>Montgomery</i>	STATE <i>AL</i>	ZIP <i>36116</i>	PHONE <i>288-0822</i>
ADDRESS <i>3115 Old Selma Road</i>	CITY <i>Montgomery</i>	STATE <i>AL</i>	ZIP <i>36108</i>	PHONE <i>263-6022</i>
ADDRESS <i>5005 DR</i>	CITY <i>Montgomery</i>	STATE <i>AL</i>	ZIP <i>36108</i>	PHONE <i>834-3232</i>
ADDRESS <i>5005 DR</i>	CITY <i>Montgomery</i>	STATE <i>AL</i>	ZIP <i>36108</i>	PHONE <i>272-9133</i>

IN EMERGENCY NOTIFY <i>Line R Barnes</i>	RELATIONSHIP <i>Wife</i>	CITY	STATE	ZIP	PHONE <i>712-90</i>
	RELATIONSHIP	CITY	STATE	ZIP	PHONE <i>867-0632</i>

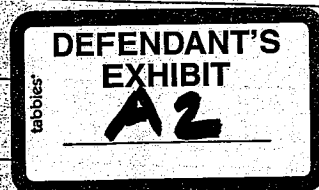
RELATIVES OR FRIENDS EMPLOYED BY THIS CO.	NAMES	RELATIONSHIP	NAMES	RELATIONSHIP

EDUCATION	ELEM.	JHS <i>7<sup>th</sup></i>	S.H.S.	SPECIAL SKILLS OR TRAINING
	COLLEGE	1 2 3 4 MAJOR		
	OTHER			

## TERMINATION RECORD

<input type="checkbox"/> RESIGNATION	REASON
DATE	
<input type="checkbox"/> DISMISSAL	REASON
DATE	
<input type="checkbox"/> RECOMMENDED	REASON



18

Form 10

**CITY AND COUNTY OF MONTGOMERY  
PERSONNEL DEPARTMENT  
RECOMMENDATION FOR PERSONNEL ACTION**

Submit in Triplicate

Department/Division Fleet Management Date 11/17/04  
 Name of Employee James Ken Barnes Effective Date 11/16/04  
 Social Security # 420-76-7898 Classification Auto Mechanic Job Code 5243

Item 2 requires the signature of both department heads. Items 2, 3, 4, 5, 6, 15 require approval of Personnel Director before action is official. Items 3, 4, 5, 7 must have copy of letter to employee attached. Item 8 should have copy of letter of resignation.

1. Transfer within department .....	( )	9. Retirement .....	( X )
2. Transfer to another department .....	( )	10. Separation by death .....	( )
3. Demotion .....	( )	11. Expiration by Temporary Appointment .....	( )
4. Layoff .....	( )	12. Return Leave Without Pay .....	( )
5. Dismissal .....	( )	13. Return from Military Leave .....	( )
6. Leave without pay .....	( )	14. Change of Name .....	( )
7. Suspension .....	( )	15. Change in Salary .....	( )
8. Resignation .....	( )	16. other .....	( )

ITEMS AFFECTED BY ACTION	FROM	TO
--------------------------	------	----

Department  
(items 1 & 2)

Classification & Salary  
(items 1 2 3)

Dates  
(items 6 & 7)

Name  
(Item 14)

Amount  
(Item 15)

Other  
(Item 16)

Funds are available *E. David Harris* Date NOV 18 2004  
 Disbursing Officer

Explanation and remarks (Give reason for any action which is not self-explanatory)

(Signed) 1. <u><i>Bob N. Bright</i></u>	Date <u>NOV 18 2004</u>
2. <u><i>James H. Gaddis</i></u>	Date <u>11/17/2004</u>
3. _____	Date _____
4. <u><i>Barbara M. Montoya</i></u>	Date <u>NOV 24 2004</u>

Appointing Authority  
 Personnel Director

FORM 100

## CITY PAYROLL DEPARTMENT

SUBMIT IN TRIPLICATE

Section A To be completed for items 1, 2, 3, 15 &amp; 16 on Form 10 and Promotion on Form 5

Dept./Div. Number 4800

Employee's Name James K. Barnes

Effective Date 11/16/2004

MO. DA. YR.

Social Security Number: 420-76-7898

CURRENT CLASSIFICATION &amp; SALARY

5243

s09

11

JOB CODE

PAY RANGE

STEP

NEW CLASSIFICATION &amp; SALARY INFORMATION

NEW PAYROLL/DEPT# 4800

NEW JOB CODE

NEW PAY RANGE

NEW STEP

IF APPLICABLE  
REVIEW DATE FOR  
NEXT INCREASE

(MO/DA/YR)

ITEM 15 NEW HOURLY RATE:

WKLY / BW

SCH. HOURS

IF ACTION INVOLVES A PAY OUT ON PAYROLL, WAS EMPLOYEE ADVANCED WORK TIME ON BI-WKLY 4/15/83  
WEEKLY PAYROLL 4/8/83 OR BI-WEEKLY/WEEKLY 1985?

no

YES/NO

IF YES: HOW MANY HOURS WERE ADVANCED:

(1983)

HOURS

(1985)

HOURS

TOTAL

0.0

HOURS

AFTER TIME USED ON FINAL TIME SHEET, PAY REMAINING LEAVE BALANCES AS FOLLOWS:

ANNUAL LEAVE HOURS:

29.8

SICK LEAVE HOURS:

3.4 (1/2 Accrued)

COMPENSATORY HOURS

31.8

PERSONAL LEAVE HOURS:

0.0

TOTAL LEAVE HOURS:

65.0

LAST DAY IN PAY STATUS: 11/15/2004

Section B To be completed with Forms 3,5,8,9 &amp; 40 or Re-employment on Form 10

DEPARTMENT/DIVISION NUMBER:

VERIFIED SOCIAL SECURITY NUMBER

THE FOLLOWING PERSON HAS BEEN APPOINTED: TEMPORARY:

PERMANENT:

NAME:

FIRST:

MI

LAST

EFFECTIVE DATE:

(MO/DA/YR)

STREET ADDRESS

CITY

STATE

ZIP

PHONE NUMBER

RACE

SEX

MARITAL  
STATUSNO. OF  
DEPENDENTS

BIRTHDAY

HOURLY RATE

JOB CODE

PAY RANGE

STEP

REVIEW DATE

PAID:

WILL ACCRUE LEAVE:

WILL PAY RETIREMENT:

WEEKLY

YES

YES

BI-WEEKLY

NO

NO

SCHEDULED HOURS PER PAY PERIOD:

NON-SCHEDULED, PAID HOURS WORKED ONLY:

WAS EMPLOYEE PREVIOUSLY EMPLOYED BY THE CITY OF MONTGOMERY?

YES/NO

PAID WKLY OR BW

IF YES:

DEPT #

TERM. DATE

PREVIOUS SERVICE

REMARKS:

MONTHS DAYS YEARS

## CITY OF MONTGOMERY, ALABAMA

## BI-WEEKLY TIME RECORD

4800 DEPT/DIV GARAGE  
 NO. 5243 TITLE AUTO MECHANIC -  
 PAY PERIOD: 24

PAY PERIOD ENDING: 11/18/04  
 EMPLOYEE NAME: JAMES K BARNES  
 EMPLOYEE NO: 420-76-7898

HOURLY RATE 17.5413

SCH. HRS. 80.0000  
 COMP 31.8

ACCRUED LEAVE BALANCE AT 11/05/04 ANNUAL 38.0 SICK 4.0

## TYPE OF HOUR CODES

01 REGULAR  
 02 OVERTIME  
 10 ANNUAL LEAVE  
 11 SICK LEAVE  
 15 NEW COMPENSATORY LEAVE  
 52 TIME & 1/2 OVERTIME

25 MILITARY LEAVE  
 26 JURY DUTY W/PAY  
 27 RELIEVED OF DUTY W/PAY  
 28 EDUCATIONAL LEAVE W/PAY

29 REGULAR LEAVE W/O PAY  
 30 RELIEVED OF DUTY W/O PAY  
 31 MILITARY LEAVE W/O PAY  
 32 SUSPENSION  
 36 NO WORK AVAILABLE

90 INSTRUCTORS FEES  
 53 HOLIDAY PAY  
 54 HOLIDAY PERSONAL LEAVE

EMPLOYEE SHOULD SIGN  
 IF LEAVE TIME IS USED.

X unavailable

EMPLOYEE SIGNATURE

CERTIFIED BY:

X *James K. Barnes*  
 SUPERVISOR SIGNATURE

	HOURS								AMOUNT	
	REGULAR 01		OVERTIME 02		CODE	OTHER		CODE	OTHER	
	HOURS	FUND	HOURS	FUND		HOURS	FUND		AMT	FUND
FRI 11/5	0					8	10			
SAT	-									
SUN	-									
MON 11/8	8									
TUES	7.8					2	10			
WED	8									
THURS	0					8	53			
FRI 11/12	8									
SAT	-									
SUN	-									
MON 11/15	0					8	10			
TUES	-									
WED	-									
THURS	-									

COMP TIME TO BE ADDED TO ACCRUED

PERSONAL 49/

COMP. 99/

CODE TOTAL HOURS

01  
 GRAND TOTALS 31.8

52  
 .

02  
 .

10 116.2  
 53 8.0

OTHER  
 .

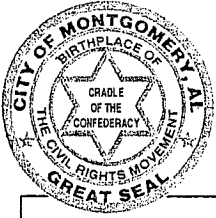
AMT.  
 .

TOTAL REGULAR PLUS OTHER  
 MUST EQUAL SCHEDULED HOURS

56.0

NOTATIONS: Retired effective 11/16/05.






# City of Montgomery, Alabama

## Employees' Retirement System

### MEMORANDUM

TO: TERRY H GADDIS, DIRECTOR  
FLEET MANAGEMENT

FROM: CLAIRE KING   
ADMINISTRATOR

DATE: 10/14/04

SUBJECT: EMPLOYEE RETIREMENT

This is to inform you JAMES K BARNES, has filed the necessary application with the Employees' Retirement System for their retirement to be effective 11/16/04. The last day for active status (work time, leave time or off days) will be 11/15/04.

Form 10

Submit in Triplicate

# **PERSONNEL DEPARTMENT RECOMMENDATION FOR PERSONNEL ACTION**

Department/Division CITY SHOP Date 10/5/2002

Name of Employee JAMES K BARNES Effective Date 10/11/2002

Social Security # 420-76-7898 Classification AUTO MECHANIC -  
SMALL GAS ENG Job Code 5243

Item 2 requires the signature of both department heads.

Items 2, 3, 4, 5, 6, 15 require approval of Personnel Director before action is official. Items 3, 4, 5, 7 must have copy of letter to employee attached. Item 8 should have copy of letter of resignation.

- |   |     |  |       |
|---|-----|--|-------|
| 1. Transfer within department .....     | ( ) | 9. Retirement .....                          | ( )   |
| 2. Transfer to another department ..... | ( ) | 10. Separation by death .....                | ( )   |
| 3. Demotion .....                       | ( ) | 11. Expiration by Temporary Appointment..... | ( )   |
| 4. Layoff .....                         | ( ) | 12. Return Leave Without Pay.....            | ( )   |
| 5. Dismissal .....                      | ( ) | 13. Return from Military Leave.....          | ( )   |
| 6. Leave without pay .....              | ( ) | 14. Change of Name .....                     | ( )   |
| 7. Suspension .....                     | ( ) | 15. Change in Salary .....                   | ( x ) |
| 8. Resignation .....                    | ( ) | 16. Change in Title .....                    | ( )   |

ITEMS AFFECTED BY ACTION	FROM	TO
Department (Items 1 & 2)		
Classification & Salary (Items 1, 2, 3)		
Dates (Items 6 & 7)		
Name (Item 14)		
Amount (Item 15)	Pos/Grade/Step 5243 310 8 Hrly/BW 16.142 1,291.36 Annual 33,575.36	5243 S09 10 16.6495 1,331.96 34,631.00
Other (Item 16)		
Funds are available	<i>E. Thomas Fawcett</i> Disbursing Officer	Date <u>OCT - 9 2002</u>

## **Explanation and remarks (Give reason for any action which is not self-explanatory)**

Employee warrants 1 step merit increase per rule 4 of new Pay Plan.

*reinstate Merit date to 9-27-83*

(Signed) 1. *J. A. ...* Date OCT - 9 2002  
 2. *James H. ...* Date Oct 5, 2002  
 3. *Barbara M. ...* Date ...  
 4. *...* Date OCT 16 2002

Personnel Director

FORM 100

## CITY PAYROLL DEPARTMENT

SUBMIT IN TRIPLICATE

## Section A To be completed for Items 1, 2, 3, 15 &amp; 16 on Form 10 and Promotion on Form 5

Dept./Div. Number 4800/711 Employee's Name JAMES K BARNESEffective Date: 10/11/2002 Social Security Number: 420-76-7898CURRENT CLASSIFICATION & SALARY 5243 310 8

JOB CODE PAY RANGE STEP

## NEW CLASSIFICATION &amp; SALARY INFORMATION

NEW PAYROLL/DEPT#

NEW JOB CODE 5243 NEW PAY RANGE S09 NEW STEP 10IF APPLICABLE  
REVIEW DATE  
FOR NEXT  
INCREASE9-27-03  
11-18-02  
(MO/DA/YR)ITEM 15 NEW HOURLY RATE: 16.6495 WKLY / BW 1,331.96 SCH. HOURSIF ACTION INVOLVES A PAY OUT ON PAYROLL, WAS EMPLOYEE ADVANCED WORK TIME ON BI-WKLY 4/15/83  
WEEKLY PAYROLL 4/8/83 OR BI-WEEKLY/WEEKLY 1985?

YES/NO

IF YES: HOW MANY HOURS WERE ADVANCED: (1983) 0.0 HOURS  
(1985) 0.0 HOURS  
TOTAL 0.0 HOURS

AFTER TIME USED ON FINAL TIME SHEET, PAY REMAINING LEAVE BALANCES AS FOLLOWS:

ANNUAL LEAVE HOURS: 0.0SICK LEAVE HOURS: 0.0 (1/2 Accrued)COMPENSATORY HOURS: 0.0PERSONAL LEAVE HOURS: 0.0TOTAL LEAVE HOURS: 0.0LAST DAY IN PAY STATUS: 0.0

## Section B To be completed with Forms 3,5,8,9 &amp; 40 or Re-employment on Form 10

DEPARTMENT/DIVISION NUMBER: 4800/711 VERIFIED SOCIAL SECURITY NUMBER 420-76-7898THE FOLLOWING PERSON HAS BEEN APPOINTED TEMPORARY: 0.0 PERMANENT: 0.0NAME: FIRST: JAMES MI: K LAST: BARNES EFFECTIVE DATE: 10/11/2002  
(MO/DA/YR)STREET ADDRESS 1000 10TH AVE NW CITY ALBUQUERQUE STATE NM ZIP 87102 PHONE NUMBER 505-261-1234RACE W SEX M MARITAL STATUS M NO. OF DEPENDENTS 0 BIRTHDAY 01/01/75HOURLY RATE 16.6495 JOB CODE 5243 PAY RANGE S09 STEP 10 REVIEW DATE 10/11/2002PAID: WEEKLY 0.0 WILL ACCRUE LEAVE: YES 0.0 NO 0.0 WILL PAY RETIREMENT: YES 0.0 NO 0.0SCHEDULED HOURS PER PAY PERIOD: 0.0 NON-SCHEDULED, PAID HOURS WORKED ONLY: 0.0WAS EMPLOYEE PREVIOUSLY EMPLOYED BY THE CITY OF MONTGOMERY? 0.0 PAID WKLY OR BW 0.0  
YES/NOIF YES: DEPT # 4800 TERM. DATE 10/11/2002 PREVIOUS SERVICE 0.0  
MONTHS DAYS YEARS

REMARKS:

REMARKS:		
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#

FORM 10

Submit in Triplicate

**CITY AND COUNTY OF MONTGOMERY  
PERSONNEL DEPARTMENT  
RECOMMENDATION FOR PERSONNEL ACTION**

Department/Division City Shops/4800 Date 11 Nov 93

Name of Employee James E. Barnes Effective Date 19 Nov 93

Classification Auto Mechanic-Small Gas Engine Job Code 5243

Item 2 requires the signature of both department heads.

Items 2, 3, 4, 5, 6, 15 require approval of Personnel Director before action is official. Items 3, 4, 5, 7 must have copy of letter to employee attached. Item 8 should have copy of letter of resignation.

- |   |                                       |
|---|---------------------------------------|
| 1. Transfer within department. .... ( )     | 9. Retirement ..... ( )               |
| 2. Transfer to another department ..... ( ) | 10. Separation by death ..... ( )     |
| 3. Demotion ..... ( )                       | 11. Expiration of Temp. Apt. .... ( ) |
| 4. Layoff. .... ( )                         | 12. Return LWOP ..... ( )             |
| 5. Dismissal ..... ( )                      | 13. Return from Military Lv ..... ( ) |
| 6. Leave without Pay. .... ( )              | 14. Change in Name ..... ( )          |
| 7. Suspension ..... ( )                     | 15. Change in Salary ..... (XX)       |
| 8. Resignation. .... ( )                    | 16. ....                              |

ITEMS AFFECTED BY ACTION

FROM

TO

Department  
(Items 1 & 2)

Classification & Salary  
(Items 1, 2, 3)

Dates  
(Items 6 & 7)

Name  
(Item 14)

Amount	\$27,630	\$28,625
(Item 15)	\$1,062.70 (13.2837)	\$1,100.98 (13.7622)

Other  
(Item 16)

If Action is Resignation or Layoff, is Reemployment Recommended? Yes ( ) No ( )

Funds are available

*Keygh Samuel Austin*

Date NOV 12 1993

Disbursing Officer

Explanation and remarks (Give reason for any action which is not self-explanatory)

(Signed)

1.

*[Signature]*  
Appointing Authority  
*Donald R. Hughes*

Date NOV 15 1993

2.

Date 11 Nov 93

3.

Date

4.

*Barbara M. Montoya*  
Personnel Director

Date NOV 17 1993



FORM 100  
Revised 3/1/84

## CITY AND COUNTY OF MONTGOMERY

PERSONNEL DEPARTMENT

SUBMIT IN TRIPLICATE  
WITH FORM 10

## SECTION A

(ITEM 16) If action is re-employment, downgrade (B/W to Wkly), upgrade (Wkly to B/W), or temporary to permanent status, complete Section B instead of Section A.

DEPT/DIV NO. City Shops/4800 EMPLOYEE'S NAME James K. BarnesEFFECTIVE DATE Nov / 19 / 93 (MO/DA/YR) SOCIAL SECURITY NO.            /            /           CURRENT CLASSIFICATION & SALARY (ITEMS 1, 2, & 3) JOB CODE 5243 PAY RANGE 310 STEP 7(ITEM 15) NEW HOURLY RATE \$ 13.7622 REVIEW DATE FOR NEXT PAY INCREASE            /            /             
MO DA YR

(ITEM 3, 16 on FORM 10, PROMOTION on FORM 5)

NEW JOB CODE            NEW PAY RANGE            NEW STEP            REVIEW DATE FOR NEXT PAY INCREASE            /            /            MO/DA/YR

IF ACTION IS INVOLVING A PAY OUT ON PAYROLL:

Was employee advanced work time on 4/15/83 B/W or 4/8/83 Wkly Payroll? YES ( ) NO ( )

If YES: How many hours were advanced:            HrsAfter time used on final time sheet, pay remaining leave balance as follows: ANNUAL LEAVE HOURS:           SICK LEAVE HOURS:            (1/2 ACCRUED)COMPENSATORY HOURS:           TOTAL LEAVE HOURS:           LAST DAY IN PAY STATUS            /            /            (MO/DA/YR)

## SECTION B

SUBMIT IN TRIPLICATE WITH FORMS 3, 5, 8, 9, &amp; 40

DEPT/DIV NO.            VERIFIED SOCIAL SECURITY NO.            /            /           

The following person has been appointed: TEMPORARY ( ) PERMANENT ( )

NAME:            EFFECTIVE DATE:            /            /             
First M.I. Last MO DA YRSTREET ADDRESS:           CITY            STATE            ZIP CODE           RACE            SEX            MARITAL STATUS            NO. DEPENDENTS            BIRTHDATE            /            /             
MO DA YRHourly Rate \$            Job Code            Pay Range            Step            Review Date for next  
Pay Increase            /            /            (MO/DA/YR)

PAID: Wkly ( ) B/W ( ) Will Accrue Leave: Yes ( ) No ( ) Will pay Retirement: Yes ( ) No ( )

Scheduled Hours per Pay Period:            Non-scheduled, pay hours worked only:             
Yes ( ) No ( )

Was Employee previously employed by the City of Montgomery: Yes ( ) No ( )

If Yes:            /            Was paid: Wkly ( ) B/W ( )  
Department Date Terminated

REMARKS:

CITY AND COUNTY OF MONTGOMERY  
PERSONNEL DEPARTMENT

PERSONNEL BOARD  
MR. JOHN J. HOGG, JR., CHAIRMAN  
MR. C. LAMAR CHAMPION  
MR. EDWARD F. CROWELL

P.O. BOX 1111  
MONTGOMERY, ALABAMA 36101-1111

BARBARA M. MONTOYA  
PERSONNEL DIRECTOR  
KAREN B. CASON  
ASSISTANT PERSONNEL DIRECTOR  
TELEPHONE: 205-241-2875  
FAX: 205-241-2219

November 9, 1993

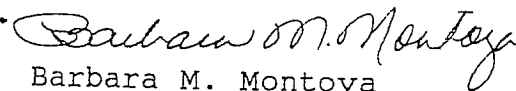
Mayor Emory Folmar  
City Hall  
103 N. Perry Street  
Montgomery, Alabama

Dear Mayor Folmar:

The Personnel Board asked me to advise you that they approved your request to adjust the salary range for Auto Mechanic-Small Gas Engine (5243) from \$21,670/\$27,630 to \$21,670/\$28,625.

If I can be of further assistance, please let me know.

Yours truly,

  
Barbara M. Montoya  
Personnel Director

cc: Mr. Jim Buckalew  
Mr. Don Hayes

DATE: 20 Sep 1996

TO: Mr. James Barnes #362


SUBJECT: Assigned Duty Hours

1. Effective 20 Sept. 1996, you are hereby assigned the following duty hours. You are to report to work no later than 0700 hours, Monday through Friday. You will have a ONE HALF HOUR LUNCH PERIOD, which is to be coordinated with your supervisor. Your duty period ends at 1530 hours.

2. Holidays and weekend overtime may have different working hours. Weekend or holiday work schedules will be posted near the time clock reflecting the individuals scheduled for work, plus their work hours.

3. Your assigned duties are: AUTO MECHANIC-SMALL GAS ENGINE. From time to time your duty assignment may be changed due to Departmental requirements. The Class Specification as outlined in the City and County of Montgomery Personnel Rules and Regulations, Rule V states, in part, the following....."They are intended to indicate the kinds of positions that are allocated to the several classes, as determined by their duties and responsibilities, and shall not be construed as declaring to any extent, or in any way what the duties or responsibilities of any position shall be, or as limiting or in any way modifying the power of any appointing authority or administrative officer to assign, direct and control the work of employees under supervision."

4. Mr. KENDRICK, your supervisor, will outline your specific duties.

  
Terry H. Gaddis, Director  
City Shops Department

M E M O R A N D U M

TO: Payroll Clerk, Garage Department  
DATE: June 3, 1998  
SUBJECT: Overtime Designation

In accordance with Personnel Rule VIII, Section 2 and 3, dealing with Overtime and Legal Holidays -- Exerpt from Section 2, (a) (3), as follows: "The employee has the sole option, by stating in writing, prior to the time that overtime work is performed, of either accepting overtime pay or compensatory time."

Therefore, in lieu of the above, I understand that I have the option to either accept overtime pay or compensatory time, as I have designated by the placement of my signature on the appropriate line below.

Ken Barnes  
(TYPE EMPLOYEE'S LAST NAME)

362  
EMPLOYEE NO.

In accordance with Personnel Rule VIII, I elect to receive pay for any overtime hours worked.

\_\_\_\_\_  
Employee's Full Signature

In accordance with Personnel Rule VIII, I elect to credit any overtime hours worked to Compensatory Leave.

X Ken Barnes  
Employee's Full Signature

NOTE: I may elect to change my option at any future date by presenting a new letter reflecting my decision. All letters will remain in effect until changed by the employee.

M E M O R A N D U M

TO: Payroll Clerk, Garage Department  
DATE: 11-26-97  
SUBJECT: Overtime Designation

In accordance with Personnel Rule VIII, Section 2 and 3, dealing with Overtime and Legal Holidays -- Exerpt from Section 2, (a) (3), as follows: "The employee has the sole option, by stating in writing, prior to the time that overtime work is performed, of either accepting overtime pay or compensatory time."

Therefore, in lieu of the above, I understand that I have the option to either accept overtime pay or compensatory time, as I have designated by the placement of my signature on the appropriate line below.

Barnes

(TYPE EMPLOYEE'S LAST NAME)

362

EMPLOYEE NO.

In accordance with Personnel Rule VIII, I elect to receive pay for any overtime hours worked.

Ken Barnes  
Employee's Full Signature

In accordance with Personnel Rule VIII, I elect to credit any overtime hours worked to Compensatory Leave.

\_\_\_\_\_  
Employee's Full Signature

NOTE: I may elect to change my option at any future date by presenting a new letter reflecting my decision. All letters will remain in effect until changed by the employee.



M E M O R A N D U M

TO: Payroll Clerk, Garage Department  
DATE: 21 November 1994  
SUBJECT: Overtime Designation

In accordance with Personnel Rule VIII, Section 2 and 3, dealing with Overtime and Legal Holidays -- Exerpt from Section 2, (a) (3), as follows: "The employee has the sole option, by stating in writing, prior to the time that overtime work is performed, of either accepting overtime pay or compensatory time."

Therefore, in lieu of the above, I understand that I have the option to either accept overtime pay or compensatory time, as I have designated by the placement of my signature on the appropriate line below.

BARNES, James K.  
(TYPE EMPLOYEE'S LAST NAME)

362  
EMPLOYEE NO.

In accordance with Personnel Rule VIII, I elect to receive pay for any overtime hours worked.

\_\_\_\_\_  
Employee's Full Signature

In accordance with Personnel Rule VIII, I elect to credit any overtime hours worked to Compensatory Leave.

✓ James K. Barnes  
Employee's Full Signature

NOTE: I may elect to change my option at any future date by presenting a new letter reflecting my decision. All letters will remain in effect until changed by the employee.

# MEMO

To: All City Employees

From: F. Tim McCollum *FTM*  
City Attorney

Subject: Ethics Code Violations

Date: June 10, 1998

To reiterate - The City of Montgomery's policy towards employee Ethics Code violations is as follows:

"No public official or public employee shall use or cause to be used equipment, facilities, time, materials, human labor, or other public property under his or her discretion or control for the private benefit or business benefit of the public official, public employee, any other person . . . ." §36-25-5(c) Code of Alabama, 1975.

Every employee of the City of Montgomery is a "public employee". Every employee is entrusted by the taxpayers of this city with the responsibility of carrying on business beneficial to the taxpayer. If an employee uses city/taxpayer time, equipment, facilities, materials, his or her work time, someone else's work time, or other public property for personal gain, that employee is guilty of violating the above quoted section. Summed up, the employee cannot use any City equipment to make money or gain a personal benefit. Any employee who engages in the activities described above will be subject to severe disciplinary action in addition to any prosecution by the Alabama Ethics Commission.

FTMcC/mwf

On this the 11 day of JUNE, 1998, I have read the above memorandum and I understand the same.

*Ken Barnes*  
Employee's Signature

GARAGE Department

FLEET MANAGEMENT DEPARTMENT

CITY OF MONTGOMERY

WRITTEN REPRIMAND

TO: Mr. James Barnes

FROM: Royce Albright, Superintendent  
Auto Light

DATE: 09 January 2003

SUBJECT: LETTER OF REPRIMAND

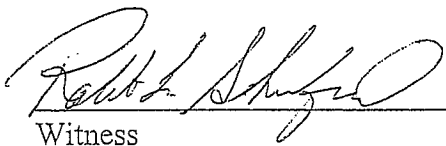
Mr. James Barnes, Employee Number 362, is being given a Written Letter of Reprimand for failure to clock in on Wednesday, 08 January 2003. Operating Instruction No. 08, Paragraph 3 states in part, "Failure or neglect to clock in or out is considered a violation " of OI No. 08 which establishes policy and procedure for using the time clock and time accounting procedure. Mr. Barnes's start time is 0700.

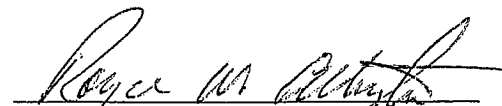
It is the responsibility of an employee to ensure he clocks out when he ends his work shift, even if he leaves earlier or later than his scheduled shift time. Failure to follow this rule is a violation of Operating Instruction No. 08, Paragraph 3, as outlined above.


Employees receiving three (3) reprimands in a 180-day period for any violations in Paragraph Eight (8) CAN EXPECT TO RECEIVE A THREE (3) DAYS SUSPENSION WITHOUT PAY.

This is Mr. Barnes's first violation of this Operating Instruction within a 180-day period. The 180-day period for this violation will end 07 July 2003.

THIS LETTER OF REPRIMAND HAS BEEN READ TO MR. BARNES.

  
Witness

  
Royce Albright, Superintendent

  
Employee Signature

CITY SHOPS DEPARTMENT

01/09/2003

7:36

Page:

22

## Employee Time Card Report

Employee: 362 BARNES JAMES

Department: Auto Cycle

From: 01/03/2003

Work rule: 0700-1530-99

To: 01/16/2003

Date	Day	Type	Act. Entry	Act. Exit	Total Time	Miss. Time	Reg.	Prm 1	Prm 2	OT1	OT2	Pay Abs.	Late Entry	Early Exit	Adj. Time	All Excp.	Man Edit
01/03	Fri	Regular	6.54	15.27	8.33		0.30	8.03									
01/04	Sat	Weekend															
01/05	Sun	Weekend															
01/06	Mon	Regular	6.53	15.25	8.32		0.30	8.02									
01/07	Tue	Regular	6.53	15.26	8.33		0.30	8.03									
01/08	Wed	Regular	15.25			8.00										Missing	
01/09	Thu	Regular	6.53			8.00										Missing	

Time classes:				Pay categories:				Exceptions:							
Tot.	Reg.	1.30	Tot.	Sick	PTot.	100%	26.10	Late	Entry	Total	Late				
Tot.	Prm1	24.08	Tot.	Vac.	PTot.	OT1		Early	Exit	Total	Early				
Tot.	Prm2		Tot.	Hol.	PTot.	OT2		Sched	Days	5 Act.	Days				
Tot.	OT1		Tot.	Berv.	PTot.	Abs.		Miss.	Time	14.22					
Tot.	OT2		Tot.	Oth.											
												Employee: _____			
												Supervisor: _____			

CITY SHOPS DEPARTMENT															
Employee Time Card Report															
Employee: 374 DUNN GLEN															
Department: Heavy Equipment															
Work rule: 0530-1400-99															
From: 01/03/2003 To: 01/16/2003															
Page: 54															
01/08/2003 7:26															
Date Day Type															
Act. Act. Total Miss. Pay Late Early Adj. All Man															
Entry Exit Time Time Reg. Prm 1 Prm 2 OT1 OT2 Abs. Entry Exit Time Excp. Edit															
01/03	Fri	Regular	8.00												Absence
01/04	Sat	Weekend													Absence
01/05	Sun	Weekend													Absence
01/06	Mon	Regular	8.00												Absence
01/07	Tue	Regular	8.00												Absence
01/08	Wed	Regular	8.00												Absence
Time classes:															
Tot.	Reg.		Tot.	Sick	PTot.	100%		Late	Entry	Total	Late				
Tot.	OT1		Tot.	Vac.	PTot.	OT1		Early	Exit	Total	Early				
Tot.	Prm2		Tot.	Hol.	PTot.	OT2		Sched	Days	4 Act.	Days				
Tot.	Prm1		Tot.	Berv.	PTot.	Abs.		Miss.	Time	32.00					
Tot.	OT2		Tot.	Oth.											
												Employee: _____			
												Supervisor: _____			

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

WRITTEN REPRIMAND

TO: Mr. James K. Barnes #362

FROM: Terry H. Gaddis, Director  
City Shops Department

DATE: 23 July 2001

SUBJECT: LETTER OF REPRIMAND

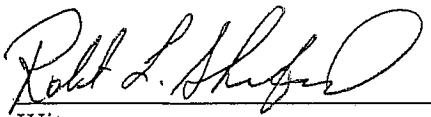
Mr. James K. Barnes, Employee Number 362, is being given a Written Letter of Reprimand for failure to clock in. Operating Instruction No. 08, Paragraph 3 states in part, "Failure or neglect to clock in or out is considered a violation " of OI No. 08 which establishes policy and procedure for using the time clock and time accounting procedure. Mr. Barnes states that he was here at work, but failed to clock in at his regular shift start time.

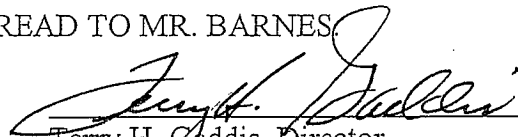
It is the responsibility of an employee to ensure he clocks out when he ends his work shift, even if he leaves earlier or later than his scheduled shift time. Failure to follow this rule is a violation of Operating Instruction No. 08, Paragraph 3, as outlined above.

Employees receiving three (3) reprimands in a 180-day period for any violations in Paragraph Eight (8) CAN EXPECT TO RECEIVE A THREE (3) DAYS SUSPENSION WITHOUT PAY.

This is Mr. Barnes's second (2<sup>nd</sup>) violation of this Operating Instruction within a 180-day period. The 180-day period for this violation will end 15 January 2002.

THIS LETTER OF REPRIMAND HAS BEEN READ TO MR. BARNES.

  
Witness

  
Terry H. Gaddis, Director

  
Employee Signature



CITY SHOPS DEPARTMENT

07/23/2001

7:20

Page:

18

## Employee Time Card Report

Employee: 362 BARNES JAMES

Department: Auto Cycle

Work rule: 0700-1530-99

From: 07/20/2001

To: 08/02/2001

.1 (10) clock in late

Date	Day	Type	Act. Entry	Act. Exit	Total Time	Miss. Time	Reg.	Pm 1	Pm 2	OT1	OT2	Pay Abs.	Late Entry	Early Exit	Adj. Time	All Excp.	Man Edit
07/20	Fri	Regular	7.04	15.25	8.21		0.30	7.51					0.04				Late entry
07/21	Sat	Weekend															
07/22	Sun	Weekend															
07/23	Mon	Regular	6.53			8.00											Missing

Time classes:				Pay categories:				Exceptions:									
Tot.	Reg.	0.30	Tot.	Sick	PTot.	100%	8.21	Late	Entry	1	Total	Late	0.04				
Tot.	Pm1	7.51	Tot.	Vac.	PTot.	OT1		Early	Exit		Total	Early				Employee: _____	
Tot.	Pm2		Tot.	Hol.	PTot.	OT2		Sched	Days	2	Act.	Days	1				
Tot.	OT1		Tot.	Berv.	PTot.	Abs.		Miss.	Time	7.39							
Tot.	OT2		Tot.	Oth.												Supervisor: _____	

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

WRITTEN REPRIMAND

TO: Mr. James K. Barnes #362

FROM: Terry H. Gaddis, Director  
City Shops Department

SUBJECT: Written Letter of Reprimand

DATE: 5 March 2001

Mr. James K. Barnes, Employee Number 362, is being given a Written Letter of Reprimand for failure to call his Supervisor Thursday, 1 March 2001, to say that he would be late reporting to duty that day. Mr. Barnes overslept and because of the lateness of the hour when he awoke, he decided to come into work rather than calling in.

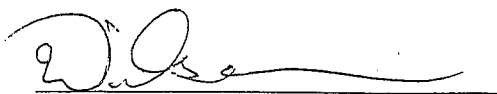
When employees are going to be late reporting to duty, they are to call their Supervisor PRIOR to the time their shift begins, and if they are not going to report for duty on that shift at all, it is their responsibility to call again to inform their supervisor of their change in plans. Failure to make this call as directed is a violation of Operating Instruction 08 Paragraph 6, which states, "Failure to call Foreman prior to shift start time will result in a Written Letter of Reprimand"....

Employees receiving three (3) Written Letters of Reprimand in a 180-day period for any violation in OI 08 can expect to receive a three (3) day suspension without pay.

This is Mr. Barnes' first (1st) violation of this Operating Instruction within a 180-day period. The 180-day period for this violation will end 27 August 2001. This letter of reprimand has been read to Mr. Barnes.

  
Terry H. Gaddis, Director

  
Employee Signature

  
Witness

CITY SHOPS DEPARTMENT

03/02/2001

7:09

Page:

18

## Employee Time Card Report

Employee: 362 BARNES JAMES

Department: Auto Cycle

From: 02/16/2001

Work rule: 0700-1530-99

2.9 (10) No call in

To: 03/01/2001

Date	Day	Type	Act. Entry	Act. Exit	Total Time	Miss. Time	Reg.	Prm 1	Prm 2	OT1	OT2	Pay Abs.	Late Entry	Early Exit	Adj. Time	All Excp.	Man Edit
2/16	Fri	Regular	6.55	15.25	8.30		0.30	8.00									
2/17	Sat	Weekend															
2/18	Sun	Weekend															
2/19	Mon	Regular	5.53	14.25	8.32		0.30	8.02								Early entry	
2/20	Tue	Regular	8.54	15.25	6.31	1.29	0.30	6.01					1.54			Late entry	
2/21	Wed	Regular	6.58	15.25	8.27		0.30	7.57									
2/22	Thu	Regular				8.00										Absence	
2/23	Fri	Regular	6.57	15.25	8.28		0.30	7.58									
2/24	Sat	Weekend															
2/25	Sun	Weekend															
2/26	Mon	Regular	6.58	15.25	8.27		0.30	7.57									
2/27	Tue	Regular	8.49	15.25	6.36	1.24	0.30	6.06					1.49			Late entry	
2/28	Wed	Regular	6.56	15.25	8.29		0.30	7.59									
3/01	Thu	Regular	9.52	15.25	5.33	2.27	0.30	5.03					2.52			Late entry	

## Time classes:

Tot.	Reg.	4.30
Tot.	Prm1	65.03
Tot.	Prm2	
Tot.	OT1	
Tot.	OT2	

Tot.	Sick	
Tot.	Vac.	
Tot.	Hol.	
Tot.	Berv.	
Tot.	Oth.	

## Pay categories:

PTot.	100%	69.33
PTot.	OT1	0.28
PTot.	OT2	
PTot.	Abs.	

## Exceptions:

Late	Entry	3
Early	Exit	1
Sched	Days	10
Miss.	Time	10.27

Total	Late	6.35
Total	Early	
Act.	Days	9

Employee: \_\_\_\_\_

Supervisor: \_\_\_\_\_

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

TO: Mr. James K. Barnes, #362

FROM: Terry H. Gaddis, Director  
City Shops Department

DATE: 07 May 1998

SUBJECT: LETTER OF REPRIMAND


Mr. James K. Barnes, Employee #362, is being given a Written Letter of Reprimand for failure to call the Control Center/Foreman PRIOR to his shift start time on 06 May 1998. Mr. Barnes's Shift Time begins at 0700 hours. When employees are going to be late reporting to duty, or will not report for work at all on any given day they are to call the Control Center or their Foreman PRIOR to time their shift begins. Failure to make this call as directed is a violation of Operating Instruction No. 08, Paragraph 6, which states "Failure to call Control Center/Foreman prior to shift start time will result in a Written Reprimand".

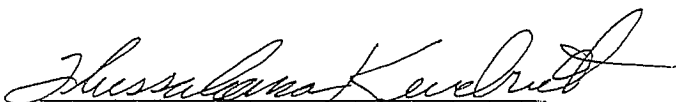
There were unforeseen circumstances, according to Mr. Barnes's Foreman, Mr. Kendrick; however the call stating he would be late was not made and he did clock in three (3) minutes after his shift time began.

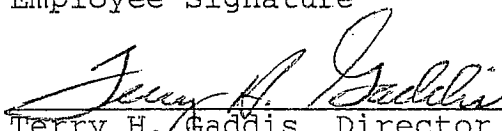
Employees receiving three (3) reprimands in a 180-day period for any violations in Paragraph Eight (8) CAN expect to receive a three (3) day suspension without pay.

THIS IS MR. BARNES'S SECOND VIOLATION OF THIS OPERATING INSTRUCTION WITHIN A 180-DAY PERIOD. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 02 NOVEMBER 1998.

THIS REPRIMAND HAS BEEN READ TO MR. BARNES.

  
Employee Signature

  
WITNESS

  
Terry H. Gaddis, Director

BADGE: 356  
 GROUP: 0700-1530-99  
 EMP : SHUFORD, R 4.0 (11)

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
05/06/98	6:54	10:59	6:54	10:59	4:05	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					4:05	0:00	0:00	0:00	0:00	0:00

BADGE: 359  
 GROUP: 0630-1530-99  
 EMP : VANDERGRIFF, W ✓

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
05/06/98	6:23	15:25	6:23	15:25	9:02	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					9:02	0:00	0:00	0:00	0:00	0:00

BADGE: 362  
 GROUP: 0700-1530-02  
 EMP : BARNES, J . 1 (10) No CALL IN

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
05/06/98	7:03	15:26	7:03	15:26	8:23	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					8:23	0:00	0:00	0:00	0:00	0:00

BADGE: 364  
 GROUP: 0700-1600-99  
 EMP : AMMONS, P



CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N   R E P R I M A N D

TO: Mr. James K. Barnes, #362

FROM: Terry H. Gaddis, Director  
City Shops Department

DATE: <sup>21/18</sup>  
19 November 1997


SUBJECT: LETTER OF REPRIMAND

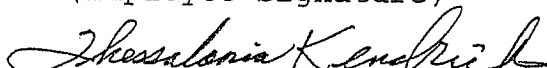
Mr. James K. Barnes, Employee No. 362, is being given a written Letter of Reprimand for failure to clock out when he left work 17 November 1997. Failure to clock in or out is a violation of Operating Instruction 08 Paragraph 6.

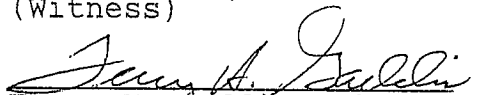
Mr. Barnes clocked in at the beginning of his shift start time, but failed to clock out when he left work after receiving a telephone call from school that his daughter had been hurt. Mr. Barnes did complete the Leave Request form, but failed to clock out.

Personnel who receive three (3) reprimands in one or a combination of any of the violations in Operating Instruction 08 in a one hundred eighty (180) day period will receive a three (3) day suspension without pay. This is Mr. Barnes' first violation in this one hundred eighty (180) day period. The expiration date for the period of time covered in this letter is 16 May 1998.

THIS LETTER HAS BEEN READ TO MR. BARNES.

  
(Employee Signature)

  
(Witness)

  
Terry H. Gaddis, Director  
City Shops Department

8 : 3 1      0 : 0 0      0 : 0 0      0 : 0 0      0 : 0 0      0 : 0 0

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
11/17/97	6:54	15:26	6:54	15:26	8:32	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					8:32	0:00	0:00	0:00	0:00	0:00
=====										

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
11/17/97	6:23	15:26	6:23	15:26	9:03	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					9:03	0:00	0:00	0:00	0:00	0:00
=====										

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
1/17/97	6:57	<u>DID NOT clock out</u>	6:57	6:57M	0:00	0:00	0:00	0:00	0:00	0:00
PERIOD TOTALS					0:00	0:00	0:00	0:00	0:00	0:00

File

M E M O R A N D U M

TO: James K. Barnes

FROM: Terry H. Gaddis, Director  
City Shops Department

THRU: Eugene Knox, Jr., Asst Director  
City Shops Department

DATE: 28 September 1995

SUBJECT: Letter of Counseling

This record will confirm the counseling session held on 28 September 1995.

Since January 1995, you have called in to notify the Department that you would be late to work or absent from work a total of 32 times. You have also been absent from work for various reasons a total of 38 times. 5 were scheduled and 33 were unscheduled for a total of 145.0 hours.

You were made aware that your absenteeism is considered to be excessive as compared to the general population of other employees in this Department and is affecting the capability of your Division to accomplish its daily mission. When you are absent, unscheduled, someone else has to perform your duties and many times, work has to be delayed and rescheduled. This has a negative impact on our production effort and causes unnecessary hardships on your supervisor, co-workers and the Department.

We have been very lenient and understanding of your past absenteeisms and you know that if a true emergency arises, we will grant your request for leave. You are also aware that we encourage you to take scheduled time off from work to relax and enjoy whatever you like to do and we realize that from time to time you require time off for medical/dental appointments. All of this is part of the benefits you have earned and all we ask is that you don't abuse your benefits.

You are reminded that you have a big responsibility to be present for work, on time, everyday, unless there is a true emergency.

This Department prides itself on accomplishing an enormous amount of quality work with a limited number of personnel, but we cannot continue to make this happen without you being present for work.

I strongly suggest that you take immediate action to correct your absenteeism and be a more dependable employee. Your job is important not only to you, but us and we need you present for work!

  
Employee's Signature

  
Supervisor's Signature

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

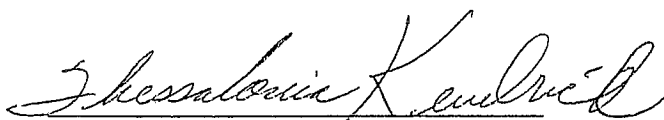
TO: Mr. James K. Barnes #362  
FROM: Terry H. Gaddis, Director  
City Shops Department  
DATE: 12 July 1995  
SUBJECT: LETTER OF REPRIMAND


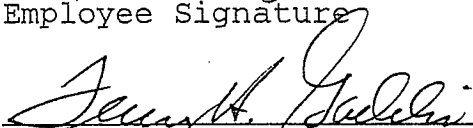
Mr. James K. Barnes, #362, is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No. 8 - TIME ACCOUNTING, Paragraph 6, which states: "When employees are going to be late reporting to duty, they are to call the Control Center/Administrative Office PRIOR to their shift start time."

Mr. Barnes failed to call in to say that he was going to be late reporting to duty on 30 June 1995. Mr. Barnes' scheduled shift hours are from 0700 -1530 Hours.

THIS IS MR. BARNES' FIRST VIOLATION OF THIS OPERATING INSTRUCTION WITHIN A 180-DAY PERIOD. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 30 JANUARY 1996.

This Reprimand was read to Mr. Barnes.

  
WITNESS

  
Employee Signature  
  
Terry H. Gaddis, Director



BADGE: 362  
 GROUP: 0700-1530--99  
 EMP : BARNES, JAMES

*6/30/95*  
*AL= 0.2*

DATE	CLOCK IN	CLOCK OUT	ROUND IN	ROUND OUT	REG	OT1	OT2	OT3	ST1	ST2
06/30/95	7:07	15:25	7:07	15:25	8:18	0:00	0:00	0:00	0:00	0:00
07/04/95	JULY 4TH				0:00	0:00	0:00	0:00	8:00	0:00
07/05/95	6:54	15:25	6:54	15:25	8:31	0:00	0:00	0:00	0:00	0:00
07/06/95	6:53	15:25	6:53	15:25	8:32	0:00	0:00	0:00	0:00	0:00

PERIOD TOTALS

25:21 0:00 0:00 0:00 8:00 0:00

PUNCH ?

GROUP: 0630-1530--04

*07/05/95 - 08:15 - 1.7*

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N   R E P R I M A N D

TO: Mr. James K. Barnes #362  
FROM: Mr. Donald R. Hayes, Director  
City Shops Department  
DATE: 23 November 1993  
SUBJECT: WRITTEN REPRIMAND

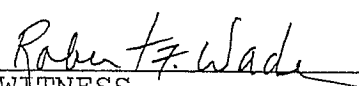
Mr. James K. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No. 08 TIME ACCOUNTING CARD paragraph 4 which states "A person clocking in after their scheduled shift start time is considered "late" even if it's just one minute.

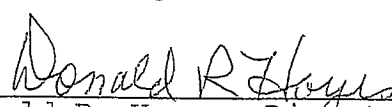
Mr. Barnes clocked in on 22 November 1993 at 0701. Mr. Barnes failed to inform the Control Center that he would be late reporting to work. Mr. Barnes' scheduled shift is 0700 to 1530 hours.

THIS IS MR. BARNES' SECOND VIOLATION OF THIS OPERATING INSTRUCTION WITHIN 180 DAYS. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 23 MAY 1994.

This Reprimand has been read to Mr. Barnes.

  
\_\_\_\_\_  
Employee Signature

  
\_\_\_\_\_  
WITNESS

  
\_\_\_\_\_  
Donald R. Hayes, Director

MO-DA	IN	OUT	IN	OUT	IN	OUT	IN	OUT	I	II	TOTALS	III	IV
11-19	06:54	15:25							8:31	0:00	8:31	8:31	
11-22	07:01	15:25							8:24	0:00	16:55	16:55	
11-23	06:55												

11/22/93(10) 0.1

362 BARNES, JAMES K.  
 0700 TO 1530 HRS.  
 SS 420-76-7898 02 PAY  
 PERIOD END 02 DEC 1993

SIMPLEX 1950-9850

22 Nov 93 - Written Reprimand - 2nd Violation within 180-day period.  
 Failure to call in to report he would be late. Clocked  
 in on 22 Nov 93 @ 0701: true.

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

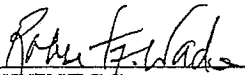
TO: Mr. James K. Barnes, #362  
FROM: Eugene Knox, Jr., Asst Director  
City Shops Department  
DATE: 07 September 1993  
SUBJECT: WRITTEN REPRIMAND



Mr. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No. 8 - TIME ACCOUNTING CARD, paragraph 4 - which states: "A person clocking in after his scheduled shift start time is considered "late" even if it is just one minute.

Mr. Barnes failed to inform the Control Center that he would be late reporting to work. He clocked in for duty at 0704 hours on 02 September 1993. Mr. Barnes' shift start time is 0700 to 1530 hours.

THIS IS MR. BARNES' SECOND VIOLATION OF THIS OPERATING INSTRUCTION WITHIN 180 DAYS. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 02 MARCH 1994.

This Reprimand was read to Mr. Barnes.

  
WITNESS:

  
Employee Signature  
  
Eugene Knox, Jr., Asst Director

MO-DA	IN	OUT	IN	OUT	IN	OUT	IN	OUT	I	II	TOTALS	III	IV
08-27	08:53	15:25			8/30/93 (11)	8.0			8:32	0:00	8:32	8:32	
08-31	06:55	15:25			9/2/93 (14)	0.1			8:30	0:00	17:02	17:02	
09-01	06:57	15:25							8:28	0:00	25:30	25:30	
09-02	07:04	15:25							8:21	0:00	33:51	33:51	

362 BARNES, JAMES K.  
 0700 TO 1530 HRS.  
 SS 420-76-7898 02 PAY  
 PERIOD END 09 SEPT 1993

3 Sep 93 - Written Reprimand for 2 Sep 93 - Failed to call in  
 to state he would be late. Reprimand  
 dated for 1 Sep 93 - not here on 3 Sep 93. nol

CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N   R E P R I M A N D

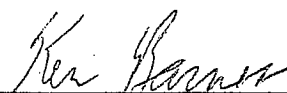
TO: Mr. James K. Barnes, #362  
FROM: Mr. Donald R. Hayes, Director  
City Shops Department  
DATE: 10 May 1993  
SUBJECT: WRITTEN REPRIMAND

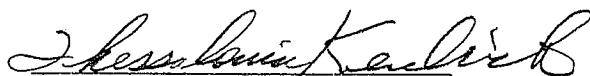
Mr. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No. 8 - TIME ACCOUNTING CARD - para 4 - which states: "A person clocking in after his scheduled shift start time is considered "late" even if it is just one minute.

Mr. Barnes failed to call in prior to clocking in at 0701, one (1) minute after his shift start time on 07 May 1993. Mr. Barnes' scheduled shift time is 0700 to 1530 hours.

THIS IS MR. BARNES' FIRST VIOLATION OF THIS OPERATING INSTRUCTION WITHIN 180 DAYS. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 08 NOVEMBER 1993.

This reprimand was read to Mr. Barnes.

  
\_\_\_\_\_  
Employee Signature

  
WITNESS:

  
\_\_\_\_\_  
Donald R. Hayes, Director





CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N   R E P R I M A N D

TO: Mr. James K. Barnes #362  
FROM: Mr. Eugene Knox, Assistant Director  
City Shops Department  
DATE: 20 August 1992  
SUBJECT: WRITTEN REPRIMAND

Mr. James Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No.8 TIME ACCOUNTING CARD Paragraph 6 which states "Neglect or failure to clock in or out is considered a violation."

Mr. Barnes failed to clock in on 18 August 1992. Mr. Barnes' scheduled shift time is 0700 hours to 1530 hours.

THIS IS MR. BARNES' FIRST VIOLATION OF THIS OPERATING INSTRUCTION WITHIN 180 DAYS. THE 180-DAY PERIOD FOR THIS VIOLATION WILL END 14 FEBRUARY 1992.

This reprimand has been read to Mr. Barnes.

Ken Barnes  
Employee Signature

Theressa Kendrick  
WITNESS

Eugene Knox  
Eugene Knox, Assistant Director



CITY SHOPS DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

TO: Mr. James K. Barnes #362  
FROM: Mr. Eugene Knox, Jr. Assistant Director *E.K.*  
City Shops Department  
DATE: 24 March 1992  
SUBJECT: WRITTEN REPRIMAND

Mr. James K. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the City Shops Department, Operating Instruction No. 37 - WEAR AND CARE OF UNIFORMS AND FOOTWEAR Para 3 - "Footwear worn by Mechanics and Auto Servicer's must conform to safety standards....Tennis shoes, footwear constructed of cloth, sandals, or high heeled shoes will not be worn at any time. Mr. Barnes was observed wearing tennis shoes on duty on 24 March 1992.

All personnel are responsible for complying with this policy. Non-compliance will result in appropriate disciplinary action.

To be further reviewed by Mr. Donald R. Hayes, Director.

*James K. Barnes*  
\_\_\_\_\_  
Employee Signature

*Robert F. Wade*  
\_\_\_\_\_  
WITNESS

*Eugene Knox, Jr.*  
\_\_\_\_\_  
Eugene Knox, Jr., Assistant Director  
City Shops Department

## RETURN TO WORK AUTHORIZATION

DONALD A. MARSHALL AND C. KIRVEN ULMER, M.D.  
1801 Pine Street, Suite 101 • Montgomery, Alabama 36106  
269-9026 • 293-8000

This is to certify that

*James Barber*

Date

*12-18-91*

has now recovered sufficiently to be able to return to (light) (regular) work duties on \_\_\_\_\_

Restrictions:

*He was seen in our office and is*

*medically cleared from all work*

Remarks:

*Good through Mon 12/23/91*

CRU-005 (5/90) ADHS / Montgomery, AL / 272-8781

Dr.

*C. Kirven Ulmer, M.D.*

M E M O R A N D U M

To: James K. Barnes  
Memorandum-for-Record

From: Eugene Knox, Jr. *EK*  
Assistant Director, City Shops

Date: 03 October 1991

Subject: Absenteeism

This will confirm the verbal counsel session held in my office on 03 October 1991.

You were made aware that your absentee record was above average for the period between 10-01-90 through 09-30-91.

During this period, you were absent from duty a total of thirty-eight (38) separate occasions, 8 were scheduled and 30 were unscheduled. A total of 211.1 hours. You stated to me that you would take corrective action to change this pattern.

cc: Personnel File

GARAGE DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

TO: Mr. James K. Barnes #362  
FROM: Mr. Donald R. Hayes, Director  
Garage Department  
DATE: 24 October 1988  
SUBJECT: WRITTEN REPRIMAND

Mr. James K. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the Garage Department, Operating Instruction No. 8 - TIME ACCOUNTING CARD Par. 4 - "A person clocking in after their scheduled shift start time is considered "late" even if it's just one minute." Mr. Barnes failed to call before his duty shift start time (0700 Hours) to state he would be late. Mr. Barnes called the Control Center at 0721 Hours on 21 October 1988 to state he had overslept and would be on to work shortly.

This reprimand has been read to Mr. Barnes.

WITNESS:

Robert F. Wade

James K. Barnes  
Employee Signature

Donald R. Hayes  
Donald R. Hayes, Director

GARAGE DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

TO: Mr. James K. Barnes #362  
FROM: Mr. Donald R. Hayes, Director  
Garage Department  
DATE: 23 December 1987  
SUBJECT: WRITTEN REPRIMAND

Mr. James K. Barnes is being given a Written Reprimand for the following violation of the Rules, Regulations or Policies of the Garage Department, Operating Instruction No. 8 - TIME ACCOUNTING CARD Par. 6 - Failure to clock in or out is considered a violation. On 22 December 1987, Mr. Barnes failed to clock in before starting his scheduled duty shift.

This reprimand has been read to Mr. Barnes.

WITNESS:

William H. Jones

Key Warner  
Employee Signature

Donald R. Hayes  
Donald R. Hayes, Director

M E M O R A N D U M

To: Mr. James K. Barnes #362  
Memorandum-for-Record *R.F.W.*  
From: Mr. Robert F. Wade, Garage Foreman  
Date: 14 July 1986  
Subject: Absenteeism

This will confirm the verbal counsel session held in my office on 11 July 86.

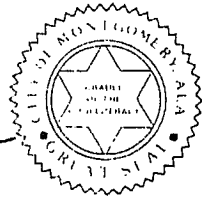
You were made aware that your absentee record was above average for the period between 1 October 1985 through 11 July 1986.

During this period, you were abesnt from duty a total of 262.9 hours. In twenty-nine (29) separate occasions, thirteen (13) were scheduled and sixteen (16) were unscheduled. You stated to me that you would take correc-tive action to change this pattern.

copy: Personnel File



# City of MONTGOMERY Alabama



EMORY FOLMAR  
Mayor

MONTGOMERY CITY COUNCIL

MRS. ALICE D. REYNOLDS-Pres.  
E.T. (BUD) CHAMBERS-Pres. Pro tem  
HERCHEL CHRISTIAN  
JOSEPH DICKERSON  
MARK GILMORE, JR.  
LEU HAMMONDS  
WILLIAM (BILL) NUNN, III  
JOE L. REED  
BILLY M. TURNER

*Mr Barnes Personnel File*

11 May 1984

Mr. James K. Barnes  
3115 Old Selma Road  
Montgomery, Al 36108

Assistance to the Police Department

Your action on Thursday, 3 May 1984, following the tornado that hit north Montgomery, did not go unnoticed.

It's team work and interest in our community that was evident in your action. I speak for this Department and let me add my "Congratulations" and "Thanks" for your effort.

*D. Hayes*

Donald R. Hayes, Director  
Garage Department

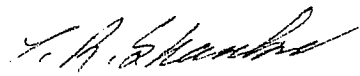
edw

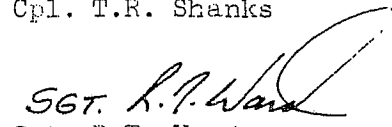
9 May 1984

Mr. Don R. Hayes  
City Garage

Dear Mr. Don R. Hayes

We of the Evidence Technician Section of The Montgomery Police Department would like to commend Willie Lee Jackson and James Barnes for their assistance in transporting Bodies from our Station Wagon to the City Morgue on Thursday, 3rd. of May, 1984. Their assistance enabled our unit to get back into service and return to the Tornado area much faster. These men did not hesitate when ask to assist in placing the Bodies from the unit into the Body Coolers in the City Morgue.

  
Cpl. T.R. Shanks

  
Sgt. R.T. Ward

GARAGE DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N   R E P R I M A N D

To: Mr. James K. Barnes  
From: Donald R. Hayes, Director  
Date: 23 February 1984  
Subject: WRITTEN REPRIMAND

Mr. James K. Barnes has been given a written reprimand  
for the following violation of the Rules, Regulations or Policies of  
the Garage Department: Operating Instruction No. 8 (6); Neglect or  
failure to clock in or out. Mr. Barnes failed to clock out on  
22 February 1983.

This reprimand has been read to Mr. Barnes.

James K. Barnes  
Employee

Robert F. Wade  
Witness

William D. Jones  
Donald R. Hayes, Director

GARAGE DEPARTMENT

CITY OF MONTGOMERY

W R I T T E N R E P R I M A N D

To: Mr. James K. Barnes

From: Donald R. Hayes, Director

Date: 20 December 1983

Subject: WRITTEN REPRIMAND

Mr. James K. Barnes has been given a written reprimand for the following violation of the Rules, Regulations or Policies of the Garage Department: Operating Instruction No. 8 (6); Neglect or failure to clock in or out. Mr. Barnes failed to clock in on 19 Dec. 83.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This reprimand has been read to Mr. Barnes.

James K. Barnes  
Employee

Robert F. Wade  
Witness

William H. Jones  
Donald R. Hayes, Director

BEASLEY, WILSON, ALLEN, CROW & METHVIN, P.C.

*Attorneys at Law*

JERE LOCKE BEASLEY  
FRANK M. WILSON  
J. GREG ALLEN  
MICHAEL J. CROW  
THOMAS J. METHVIN  
BLAINE C. STEVENS  
J. COLE PORTIS  
W. DANIEL MILES, III  
STEPHEN W. DRINKARD  
R. GRAHAM ESDALE, JR.  
L. LANDIS SEXTON  
JULIA ANNE BEASLEY  
RHON E. JONES

210 COMMERCE STREET (36104)  
POST OFFICE BOX 4100  
MONTGOMERY, ALABAMA 36103-4100  
(334) 269-2343

TELECOPIER  
(334) 223-1236

ROBERT L. PITTMAN  
EDWARD P. KENDALL  
LAWARRON N. BOONE  
RICHARD D. MORRISON  
DAVID B. CHANCELLOR  
ANDY D. BIRCHFIELD, JR.  
C. LANCE GOULD  
J. WESLEY MCCOLLUM, JR.  
JOSEPH H. AUGHTMAN  
JACQUELINE C. SMOKE  
DELACIE C. HESTER  
O. LEE HAMILTON, III

October 30, 1998

JAMES W. TRAEGER  
(1953-1987)

*To Son Austin*  
*11/4/98*  
*me*

Honorable Emory Folmar  
Mayor, City of Montgomery  
103 N. Perry Street  
Montgomery, AL 36104

RE: CHRISTOPHER SEXTON v. JOHN DEERE & COMPANY

Dear Mayor Folmar:

I recently settled a case for Chris Sexton, a City employee, who was seriously injured by a defective John Deere tractor. As a part of the settlement, the City of Montgomery will be reimbursed for workmen's compensation benefits and medical expenses.

During the preparation of the case, a number of the City employees worked very diligently in assisting me with information about the incident and the tractor. In addition, the City modified the tractor and made John Deere aware of a design flaw which represents a violation of a written industry safety standard. Hopefully, this wakeup call to the manufacturer will result in preventing additional injury or death in the future.

The following employees were extremely helpful in the case:

Jim Wilder, Terry Gaddis, James Ken Barnes, Ellis Gardner,  
Brian Lord, Doug Jones, Ross Darby, Kenny Boyer,  
Morris Gilbert, Ralph Kelley and J.C. Carnell.

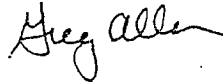
The people of Montgomery are lucky to have such fine people working for them.

*cc: Terry Gaddis*  
*Ken Barnes*

Honorable Emory Folmar  
October 30, 1998  
Page Two

Very truly yours,

BEASLEY, WILSON, ALLEN,  
CROW & METHVIN, P.C.

A handwritten signature in cursive script that reads "Greg Allen".

J. GREG ALLEN

JGA/bgs

cc: Ms. Barbara Montoya  
Personnel Director  
City of Montgomery

BEASLEY, WILSON, ALLEN, CROW & METHVIN, P.C.

*Attorneys at Law*

JERE LOCKE BEASLEY  
FRANK M. WILSON  
J. GREG ALLEN  
MICHAEL J. CROW  
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W. DANIEL MILES, III  
STEPHEN W. DRINKARD  
R. GRAHAM ESDALE, JR.  
L. LANDIS SEXTON  
JULIA ANNE BEASLEY  
RHON E. JONES

210 COMMERCE STREET (36104)  
POST OFFICE BOX 4160  
MONTGOMERY, ALABAMA 36103-4160  
(334) 209-2343

TELECOPIER  
(334) 223-1230

ROBERT L. PITTMAN  
EDWARD P. KENDALL  
LABARRON N. BOONE  
RICHARD D. MORRISON  
DAVID B. CHANCELLOR  
ANDY D. BIRCHFIELD, JR.  
C. LANCE GOULD  
J. WESLEY MCGOLLUM, JR.  
JOSEPH H. AUGHTMAN  
JACQUELINE C. SMOKE  
DELAGIE C. HESTER  
O. LEE HAMILTON, III

JAMES W. TRAEGER  
(1853-1987)

October 30, 1998

Mr. Ken Barnes  
715 Persons Road  
Wetumpka, AL 36092

RE: CHRIS SEXTON v. JOHN DEERE COMPANY

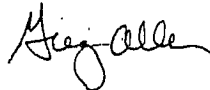
Dear Ken:

I just wanted to write you and thank you for your help in this case. You obviously know more about design than all those fancy engineer's they've got out in the Deere headquarters in Moline, Illinois. If they would listen to you then their tractors would be much safer. In any event, I know Chris is very appreciative of all that you did in this case.

With best regards, I am

Very truly yours,

BEASLEY, WILSON, ALLEN,  
CROW & METHVIN, P.C.



J. GREG ALLEN

JGA/bgs  
cc: Ms. Barbara Montoya  
Personnel Director  
City of Montgomery

*Garage*

This is to acknowledge that I attended the City of Montgomery's **Harassment in the Workplace** Training class at the Montgomery Civic Center and that I received a copy of Montgomery's Harassment Policy, which I have read and understand.

*James R. Brown*  
Signature

*2-14-02*  
Date



## M E M O R A N D U M

TO: Mayor Emory Folmar  
Mayor, City of Montgomery

FROM: Terry H. Gaddis, Director *TS*  
City Shops Department

DATE: 28 October 1994

SUBJECT: Voluntary Donation of Sick Leave To Employee

Mr. James K. Barnes, one of our automotive mechanics in the Auto/Light Truck Division - Small Engines, has exhausted all of his Sick Leave, due to hemorrhoidal problems, and hemorrhoidal surgery. The following employees would like to donate Sick Leave to Mr. Barnes:

Employee	Position	Hours
Mr. Thessalonika Kendrick <i>418-42-0604</i>	Foreman	40.0
Mr. Donald R. White <i>417-82-0721</i>	Mechanic	10.0
Mr. James D. Flynn <i>417-56-7278</i>	Mechanic	8.0
Mr. Raymond A. Gipson <i>419-64-9905</i>	Mechanic	8.0
Mr. Dallas D. Venable <i>245-06-4845</i>	Mechanic	8.0
Mr. Willie Arthur <i>421-42-0570</i>	Foreman	4.0
Mr. Clemmie E. Williams <i>416-70-4490</i>	Master Mechanic	4.0
Mr. William D. Bass <i>419-02-2464</i>	Petroleum Supvr	2.0

Request approval for these employees to donate Sick Leave to Mr. Barnes.

cc: Mr. James E. Buckalew  
Exec Asst To The Mayor

/mbs

8

M E M O R A N D U M

TO: Ms. Laina Goodson  
Payroll Division

FROM: Marsha B. Lumpkin *mal*  
Payroll Clerk, City Shops Dept

DATE: 28 March 1994

SUBJECT: Adjustment to Leave

Please make the following adjustment to Mr. Kenneth K. Barnes' leave balance:

Kenneth K. Barnes  
420-76-7898

Delete 8.0- from Holiday/Personal Leave

Subtract 8.0 hours from Annual Leave

Mr. Barnes was inadvertently charged for two (2) Personal Leave days during the month of February 1994, and he only had one (1) day available.

Thank you for your assistance.

# CITY OF MONTGOMERY, ALABAMA

## BI-WEEKLY TIME RECORD

4800 DEPT./DIV. GARAGE

PAY PERIOD ENDING: 11/17/94

NO. 5243 TITLE AUTO MECHANIC -

EMPLOYEE NAME: JAMES K. BARNES

PAY PERIOD: 24

EMPLOYEE NO: 420-76-7896

HOURLY RATE: 14.1949

SCH. HRS. 80.0000

ACCRUED LEAVE BALANCES AT 10/20/94

ANNUAL

35.5

SICK

8.0

COMP

.0

### TYPE OF HOURS CODES

- 01 REGULAR  
02 OVERTIME  
10 ANNUAL LEAVE  
11 SICK LEAVE  
15 NEW COMPENSATORY LEAVE

- 25 MILITARY LEAVE  
26 JURY DUTY W/PAY  
27 RELIEVED OF DUTY W/PAY  
28 EDUCATIONAL LEAVE W/PAY

- 29 REGULAR LEAVE W/O PAY  
30 RELIEVED OF DUTY W/O PAY  
31 MILITARY LEAVE W/O PAY  
32 SUSPENSION

- 90 INSTRUCTORS FEES  
53 HOLIDAY PAY  
54 HOLIDAY PERSONAL LEAVE

EMPLOYEE SHOULD SIGN  
IF LEAVE TIME IS USED.

X

EMPLOYEE SIGNATURE

CERTIFIED BY:

X *Marsha B. Tankersley*  
SUPERVISOR SIGNATURE *Raymond Clark*

COMP TIME TO BE ADDED TO ACCRUED

49 /

99 /

CODE TOTAL HOURS

GRAND TOTALS

01

43.8

52

02

OTHER

16.2

AMT

TOTAL REGULAR PLUS OTHER  
MUST EQUAL SCHEDULED HOURS

80.0

NOTATIONS: Payroll: Please make a correction for 4 November 1994, to reflect the above leave charges to Mr. James K. Barnes' time. He was inadvertently charged a Code 29 for 4 November 1994. Please pay him for 4 hours AL and 4 hours SL - paycheck for 9 December 1994 and DEDUCT 4 hours AL and 4 hours SL from his current balance. Thanks for your help.

*Marsha B. Tankersley*

	HOURS						AMOUNT	
	REGULAR 01		OVERTIME 02		CODE	OTHER	CODE	OTHER
	HOURS	FUND	HOURS	FUND		HOURS	FUND	AMT
11/4 FRI					11	4.0		
SAT					10	4.0		
SUN								
11/5 MON	8.0							
TUES	8.0							
11/6 WED	8.0							
THURS	7.8				10	0.2		
FRI					53	8.0		
SAT								
SUN								
11/7 MON	8.0							
TUES	8.0							
11/8 WED	8.0							
THURS	8.0							

*Paid - will be on  
paycheck dated  
12/9/94 msl*

M E M O R A N D U M

TO: Mr. James K. Barnes #362

FROM: Mr. Donald R. Hayes, Director  
City Shops Department

DATE: 02 July 1991

SUBJECT: Alabama State Driver's License Renewal

In reviewing your personnel file, I note that your current driver's license #3116609 will expire on 02 September 1991.

A condition of your employment is a current Alabama Driver's License. Therefore, request you obtain a current license and bring it to the Administrative Office so we may update our records.

M E M O R A N D U M

TO: 420767898  
JAMES K BARNES  
48 0

FROM: Hugh S. Austin  
Dept. of Finance

DATE: 05/31/88

SUBJECT: ADVANCED LEAVE

Several employees have expressed a desire to apply their advanced leave time (this is the time which was advanced when we changed the ending dates of the pay periods) against their annual leave. They would rather get this cleared from their leave records rather than wait until they leave the City. This would be especially beneficial to those employees who lose leave time each year because of the maximum carry-over rule. In this case the advanced leave would be charged against leave which would be lost anyway at the end of the fiscal year.

Your advanced hours balance is 16.0- hours. If you would like to take advantage of this, please sign and date the authorization form on the bottom of this memo.

A U T H O R I Z A T I O N

I hereby authorize the Payroll Division to charge against my annual leave balance the above number of advanced hours.

6-17-88  
Date

Ken Barnes  
Signature

*Barnes*

*Parsons*

*ST*



Office of District Attorney

Janice Clardy

Nineteenth Judicial Circuit of Alabama

JOHN R. THORNTON  
CHIEF ASSISTANT DIST. ATTY.

205-567-2237  
POST OFFICE DRAWER 401  
WETUMPKA, ALABAMA 36092

RANDALL V. HOUSTON  
ASSISTANT DISTRICT ATTORNEY  
WETUMPKA, ALABAMA 36092  
567-2237

WALTER HAYDEN III  
ASSISTANT DISTRICT ATTORNEY  
CLANTON, ALABAMA  
755-4242

TROY E. ALLEN, JR.  
ASSISTANT DISTRICT ATTORNEY  
PRATTVILLE, ALABAMA  
365-5715

November 23, 1987

Mr. Ken Barnes  
216 Lake Eagle Nest  
Wetumpka, Al. 36092

Dear Mr. Barnes:

This is a reminder that you need to be in Court December 8, 1987 for the Danny Veitch case. Please bring estimates for the damage repairs on your property. It is important that you bring those figures with you since that is the point in time when the Judge will consider restitution. If you have questions please call me.

Sincerely,

*Sandra Parsons*

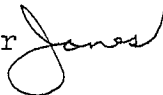
Sandra Parsons  
Victim Services Officer

SP/dn

*[Handwritten signature/initials]*

M E M O R A N D U M

TO: Mr. James K. Barnes

FROM: Mr. William H. Jones, Assistant Director  
Garage Department 

DATE: 22 September 1987

SUBJECT: Accident Reveiw Board Hearing

An Accident Review Board Hearing will convene 24 September 1987 at 0800 hours in the Director's Office.

Purpose of this hearing is to hear evidence concerning the incident which occurred on 18 September 1987 in which a tire on vehicle #4800-012 was damaged while being driven by yourself.

The Board Members will determine if negligence was involved and take action accordingly.

/crs

Attachment (1)

M E M O R A N D U M

TO: Mr. James K. Barnes

FROM: Mr. William H. Jones, Assistant Director  
Garage Department

DATE: 24 September 1987

SUBJECT: Accident Review Board Hearing

*Mr. Barnes Personnel File*

*Jones*

The Accident Review Board Hearing convened at 0802 hours, 24 September 1987 in the Director's Office with Mr. William H. Jones presiding in the absence of the Director, Mr. Donald R. Hayes. Purpose of this hearing was to review the facts surrounding the incident which occurred on 18 September 1987 and to determine if negligence was involved as well as responsibility for damages to City equipment. It is further the responsibility of the Board to decide on appropriate discipline to preclude these types of incidents from recurring.

Members Present:

Mr. William H. Jones, President  
Mr. William C. Coker, Garage Foreman  
Mr. Ronald Williams, Mechanic  
Ms. Cheryl Stephens, Recorder

Mr. Barnes' explanation of the incident was as follows:

The forklift (4800-012) had been sitting there for a few days. I got through working on the stump cutter and I pulled up the forklift to hook up. When I backed out, I was in "First Low" -- as I backed up, the forklift went up and I knew something was wrong. When I pulled back forward the jack stand punctured the tire. I have no idea how the jack stand got there up under the forklift -- I did not put it there but it had to be under it because the tire was punctured on the inside. I did not see it, I got in on the left side and the jack stand was on the right.

Mr. Ronald Williams stated that he did not feel that Mr. Barnes had been negligent. He said that if Mr. Barnes had not put the jack stand there -- then he had no way of knowing it was there and to look for it. The jack stand was not visible unless you got down and looked under the forklift.

Mr. Coker agreed with Mr. Williams' statement and did not feel that Mr. Barnes had been negligent.

Mr. Jones stated that the Board would not hold Mr. Barnes responsible for the damaged tire (Cost \$206.42) in view of the fact that he had not been negligent -- but further admonished Mr. Barnes to make sure he looked behind and under any vehicle before attempting to move it.

The Board determined that no further disciplinary action would be taken.

/crs

cc: Mr. Stan Robinson, Safety Supervisor  
Mrs. Barbara Montoya, Personnel Director



4800-012

INCIDENT REPORT  
CITY OF MONTGOMERY

DEPARTMENT Garage & Shops DATE September 18, 1987

COMPLAINANT: Bill Coker, Supervisor City Garage

ADDRESS: Public Works Facility

INCIDENT: Damage to Tire REPORTED BY: Mr Coker

ADDRESS: City Garage PHONE: 241-2509

DATE & TIME OF INCIDENT: September 18, 1987 11:00 AM

PLACE OF OCCURANCE: City Garage

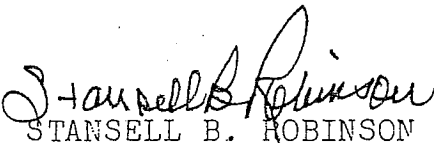
CITY PROPERTY: XX PUBLIC PROPERTY:        PRIVATE PROPERTY:       

DETAILS OF COMPLAINT: Mr Bill Coker reported that Mr James K. Barnes

while operating city vehicle 4800-012 ran over a jack stand in the garage

area and damaged a tire . It was necessary to replace the tire.

There was no injury and there was no other vehicle involved..

  
STANSELL B. ROBINSON  
Safety Director

## ---ACCIDENT/INCIDENT WORKSHEET---

VEHICLE # 4800-012 VIN # 2026601205MAKE, YEAR & MODEL Fork Lift 1978DATE OF ACCIDENT 9-18-87DATE BROUGHT TO SHOP 9-18-87 RETURNED TO SERVICE 9-18-87SUMMARY OF COSTS:LABOR / MAN HOURS 1.00 @ \$ 1075 = \$ 1075MATERIALS \$ N/APARTS / SUBLET COSTS \$ 206.42WRECKER FEES \$ N/ATOTAL COST TO REPAIR VEHICLE \$ 217<sup>17</sup>

\*\*\*\*\*

GLASS COMPANY (VENDOR) N/A

M E M O R A N D U M

TO: All Department Personnel

FROM: Mr. Donald R. Hayes, Director  
Garage Department

DATE: 18 September 1987

SUBJECT: Sick Leave

The following Rule VIII, Section 5 - Sick Leave (C), is quoted from the City and County of Montgomery Personnel Department Rules and Regulations:

Sick Leave may be granted only for absence due to personal illness, maternity, legal quarantine, attendance upon members of the immediate family whose illness requires the care of the employee, or death in the immediate family of the employee. Immediate family is hereby defined to include spouse, children, parents, grandparents, parents-in-law, and siblings. Unusually strong ties with other other relatives may be recognized for leave purposes upon written justification by the employee and approval of the appointing authority and/or Personnel Director. An employee claiming sick leave may be required by the appointing authority to file a certificate from a physician stating the kind and nature of sickness or injury, that the employee was incapacitated for work for the period of absence, that the employee is physically unable to perform duties or that the employee has no contagious disease that might jeopardize the health of other employees, or that the employee is required to provide care for an ill family member.

As stated in this rule, an employee claiming sick leave may be required to file a certificate from a physician. This is the KEY PHRASE in the rule. Should you be required or directed to obtain a physician's certificate, the physician must comply with this rule -- state the kind and nature of sickness or injury, etc., etc., as outlined above. The certificate must include the date(s) the employee was absent from work and under the doctor's care. In other words, a mere doctor's stamp, nurse's signature, etc. will not be accepted. It is incumbent upon the employee that this personnel rule be followed to the letter.

NOTE: ALSO SEE GARAGE DEPARTMENT OPERATING INSTRUCTION NO. 6  
SUBJECT: LEAVE REQUEST

I Acknowledge receipt and understanding of this memorandum.

  
\_\_\_\_\_  
Employee Signature

362  
Employee #

9-22-87  
Date

James K. Barnes

YOU MAY WANT TO CARRY THESE INSTRUCTIONS ON YOUR PERSON.

M E M O R A N D U M

TO: Mr. James K. Barnes #362  
FROM: Mr. Donald R. Hayes, Director  
Garage Department  
DATE: 25 November 1988  
SUBJECT: Leave Without Pay

*Ken Barnes*

*James*

In reviewing the accrual information on vacation, sick and compensatory time, payroll records reflect that as of 23 November 1988, you are out of sick leave and compensatory leave. You have thirty-five and eight tenths (35.8) hours of annual leave remaining. This is a little more than four (4) days of leave time available to you.

Should you use up your remaining leave and get in a situation where you have to be off work, you will be placed in a "Leave Without Pay Status". Further, once you are in a "Leave Without Pay Status", it is my policy to recommend dismissal from City employment. It would therefore, behoove you to build your leave time which could possibly prevent you from losing your job.

DRH:JFB

M E M O R A N D U M

*Mr Barnes Personnel File*

TO: Mr. James K. Barnes #362

FROM: Donald R. Hayes, Director *D. Hayes*  
Garage Department

DATE: 26 March 1987

SUBJECT: Leave Without Pay

In reviewing the accrual information on Vacation, Sick and Compensatory Time, payroll records reflect that as of 24 March 87 you are out of Sick Leave. You have (14.0) fourteen hours of Annual Leave remaining. This is somewhat less than (2) two days of Leave Time available to you.

Should you use up your remaining leave, you will be placed in a Leave Without Pay Status. Further, once you are in a Leave Without Pay Status, it has been my policy to recommend dismissal from City employment. It would therefore, behoove you to build your leave time and not possible lose your job.

M E M O R A N D U M

TO: Mr. James K. Barnes

FROM: Mr. Donald R. Hayes, Director  
Garage Department

DATE: 28 October 1986

SUBJECT: Leave Without Pay

*Mr Barnes Personnel  
File*

*D. Hayes*

In reviewing the accrual information on Vacation, Sick and Compensatory Time, payroll records reflect that you have fourteen (14) hours of Annual Leave remaining. This is somewhat less than two (2) days of Leave Time available to you.

Should you use up your remaining leave, you will be placed in a Leave Without Pay Status. Further, once you are in a Leave Without Pay Status, it has been my policy to recommend dismissal from City employment. It would therefore, behoove you to build your leave time and not possibly lose your job.

/crs

M E M O R A N D U M

TO: Mr. James K. Barnes #362

FROM: Mr. Donald R. Hayes, Director *D. Hayes*  
Garage Department

DATE: 01 October 1986

SUBJECT: Leave Time

This is to advise you that as of today, you have now used up your Sick and Compensatory Leave. You have 14.1 hours of Annual Leave left. If you should become ill, or have an emergency which required you to be off in excess of the 14.1 hours --- you would immediately be in a Leave Without Pay Status.

WITNESS:

*William H. Jones*

*James K. Barnes*  
ACKNOWLEDGED BY: James K. Barnes

CITY OF MONTGOMERY

GARAGE DEPARTMENT

Payroll Deduction Authorization

TOOL CONTRACT

V-016

I, James Kenneth Barnes,

(Name - please type)

S. S. # 420-76-7898, do hereby

authorize my employer to deduct \$ 20.00

(minimum - \$20.00)

from my pay until a total of \$ 2,944.59

is attained. Beginning this date: February 21, 1985.

SIGNED:

James K. Barnes



DATE: 10-11-85

I, John Hooper (co-worker), have this date  
(name and relationship)  
picked up payroll check for James K. Barnes  
(employee)  
in the amount of \$ 42.80.

John Hooper  
Signature

STATEMENT

Date 27 September 1983

TO WHOM IT MAY CONCERN

Re: Responsibility for personal tools

I, James K. Barnes, acknowledge permission by the Garage Director to provide my personal tools to be used in my assigned duties as a mechanic with the Garage Department, City of Montgomery.

I furthermore acknowledge that I will be solely responsible for the safekeeping and repair of my personal tools. I understand and agree that the City of Montgomery or any of its representatives shall not bear any responsibility for replacing or paying for personal tools that are lost, stolen, misplaced, broken or otherwise rendered unusable.

I have voluntarily agreed to furnish my personal tools and to abide by the aforementioned statement.

Donald R. Hayes  
Witness

James K. Barnes  
Employee

Date 9 September 83To: Mr. James K. Barnes #362

Subject: Assigned Duty Hours

1. Effective 27 September 1983, you are hereby assigned the following duty hours. You are to report to work no later than 7:00 a.m. Monday through Friday. You will have a Hour Day Day 30-minute lunch/dinner period which will be coordinated with your supervisor. Your duty periods ends at 3:30 p.m.
2. Holidays and weekend overtime may have different working hours. Weekend and holiday work schedules will be posted near the time clock reflecting the individuals scheduled for work plus their work hours.
3. Your assigned duties are Automotive Mechanic/ Auto Light Truck Division. From time to time your duty assignment may be changed due to departmental requirements. The Class Specification as outlined in the City and County of Montgomery Personnel Rules and Regulations, Rule V states, in part, the following . . . . "They are intended to indicate the kind of positions that are allocated to the several classes, as determined by their duties and responsibilities, and shall not be construed as declaring to any extent, or in any way what the duties or responsibilities of any position shall be, or as limiting or in any way modifying the power of any appointing authority or administrative officer to assign, direct and control the work of employees under his supervision."
4. Mr. Robert F. Wade, your supervisor, will outline your specific duties.

Donald R. HayesDonald R. Hayes, Director  
Garage Department

Operating Instruction No. 38

To: All Department Personnel

Subject: Accident Review Board

Purpose: To establish an Accident Review Board and guidelines

1. Effective 23 April 1980 a panel consisting of four (4) persons was designated to investigate, hear evidence from all parties involved, and determine cause of accidents.
2. The Board members make a decision of the liability and responsibility of the parties involved. In cases where negligence is proven to be the cause of an accident, appropriate disciplinary action will be taken against the offender. Disciplinary action taken will be based on the severity of the accident and the degree of negligence involved. Actions taken could be a written reprimand, suspension or dismissal.
3. Members of the Board will consist of the:
  - A. Director
  - B. Assistant Director
  - C. Garage Foreman
  - D. Mechanic
4. A copy of the accident, Board findings and actions taken will be placed in the vehicle folder, individual's personnel folder and one copy sent to Personnel Department, City Hall.

*Donald R. Hayes*

Donald R. Hayes, Director  
Garage Department

Anderson Health Center, P.C.  
1135 HIGHWAY 231 NORTH  
WETUMPKA, ALABAMA 36092  
PHONE: (205) 567-8429

File  
03/26/87  
WS

## RETURN TO WORK - SCHOOL

Date

3-25-87

This is to certify that

Ken Barnes

has recovered sufficiently to be able to return to

light ☒ regular ☐ work/school duties on

3-26-87

Restrictions:

Dr. Jim G. Anderson

Remarks:

patient will be checked  
Thurs. afternoon

TELEPHONE: 567-6109

STATE #8166

DEA #AM 7940770

KRIS MCCORMACK, M.D.

1149 HOSPITAL DRIVE

WETUMPKA, ALABAMA 36092

NAME

James Ken Barnes

DATE

9/3/86

ADDRESS

R

Mr James Ken Barnes is sick and  
should be excused from work  
tomorrow and Friday.

REFILL 1 2 3 4 5

M D

PRODUCT SELECTION PERMITTED

Kris McCormack MD

M D

DISPENSE AS WRITTEN

## EXCUSED ABSENCE

Barnes

er my care for the period

-7-87

-9-87

no illness, no work

this patient's absence was physician

uctions:

File  
01/12/87  
WS

## DISABILITY CERTIFICATE

This is to certify that

Ken Barnes

Date

3-23-87

F-1/5

03/26/87

WS

Anderson Health Center, P.C.  
1135 HIGHWAY 231 NORTH  
WETUMPKA, ALABAMA 36092  
PHONE: (205) 567-8429

has been under my professional care and was totally incapacitated  
from 3-23-87 to 3-25-87

JOSEPH R. BENSON, M.D., P.A.

Office Phone 567-6579

WETUMPKA, ALABAMA

Hours: 9 to 12 and 2 to 4, Closed Wednesday, Saturday P.M.  
AFTERNOONS BY APPOINTMENT

For

Address

Date

R

Unable to work Aug 18  
Thru Aug 22, 1986Dr. Crushing injury  
LT low back & ST. flankHe is able to return to  
work - Aug 25, 1986Joe Benson M.D.  
5676579

M.D.

Product Selection Permitted

Dispense

Pharmacist Label All Prescriptions. Refill 5 Times

This prescription is for you for  
or by some

## MULBERRY FAMILY PRACTICE ASSOCIATES, P.A.

1301 Mulberry Street  
Montgomery, Alabama  
Office Phone 265-7021DONALD A. MARSHALL, M.D.  
AM-57414411/6965MONT F. HIGHLEY, III M.D.  
AH-3147229/5501PAUL L. CLASSEN, M.D.  
AC-1856232/10589GEORGE HANDEY, M.D.  
AH-9454339/9825

FOR:

DATE:

Ken Barnes  
OK to return to  
work tomorrow

Refill 0 1 2 3 4 5 pm

Refill 0 1 2 3 4 5 pm

Had a "Stomach  
Bug"

PHYSICIAN REPORT OFF JOB INJURY  
CITY OF MONTGOMERY

DEPARTMENT \_\_\_\_\_

DATE 2/6/87

TIME \_\_\_\_\_

EMPLOYEE NAME Ken Barnes

EMPLOYEE SEEN \_\_\_\_\_

OR X

(In Office)

(Emergency Room)

X-RAYS \_\_\_\_\_

OR X

(Were)

(Were not)

TAKEN.

DIAGNOSIS Perirectal AbscessTREATMENT I & D abscessMEDICATION PRESCRIBED  
(Types & Amounts)Tylenol #3 (24x0)

DISPOSITION: Employee \_\_\_\_\_

OR X

(may)

(may not)

return to work thisdate.

TO: \_\_\_\_\_

(Normal Duty)

OR \_\_\_\_\_

(Light Duty)

If employee cannot return to work this date, please indicate date

expected to return 2/9/87

(Date)

TO \_\_\_\_\_

(Normal Duty)

OR X

(Light Duty)

DATE OBSERVED BY DOCTOR: \_\_\_\_\_

DATE TO RETURN TO DOCTOR: Feb 12, 3:30 pmA. Paulino, MD  
Signature of Attending Physician

REMARKS:

JOSEPH R. BENSON, M.D., P.A.  
WETUMPKA, ALABAMA  
Office Phone 567-6579  
Hours: 9 to 12 and 2 to 4, Closed Wednesday, Saturday P.M.  
AFTERNOONS BY APPOINTMENT

For \_\_\_\_\_  
Address \_\_\_\_\_  
Date \_\_\_\_\_

R

Re orders

9/21/87

*[Signature]*

Talk to Mrs. H.M. Benson  
She Confirmed Mr Barnes was  
At Dr Benson Office 9/21/87  
Raymond L. Carls

Product Selection Permitted \_\_\_\_\_ M.D. Dispense As Written \_\_\_\_\_ M.D.

Pharmacist Label All Prescriptions. Refill 5 Times Unless Otherwise Specified Below. AE0482593

ACS 127

This prescription is for you for this illness. If taken by you for another illness or by someone else at any time may be dangerous.

REPT. UT. DICT. 1 2 3 4 5 TIMES P.A.N. ☐ NON-REP. ☐

JOSEPH R. BENSON, M.D., P.A.  
WETUMPKA, ALAB  
Office Phone 567-6579  
Hours: 9 to 12 and 2 to 4, Closed Wednesday, Saturday P.M.  
AFTERNOONS BY APPOINTMENT

For \_\_\_\_\_  
Address \_\_\_\_\_  
Date \_\_\_\_\_

R

unable to work

today - possibly

*[Signature]*  
9/21/87

Pat Strength  
Confirmed Mr Barnes  
was at Dr Benson  
Office 9-2-87  
Raymond L. Carls

Product Selection Permitted \_\_\_\_\_ M.D. Dispense As Written \_\_\_\_\_ M.D.

Pharmacist Label All Prescriptions. Refill 5 Times Unless Otherwise Specified Below. AE048

ACS 127

This prescription is for you for this illness. If taken by you for another illness or by someone else at any time may be dangerous.

REPT. UT. DICT. 1 2 3 4 5 TIMES P.A.N. ☐ NON-REP. ☐



06/22/87 OK  
WJ4143 Atlanta Highway  
Montgomery, Alabama  
36109

## CERTIFICATE FOR RETURN TO SCHOOL OR WORK

DATE 6/18/87 Ken Barnes has been under my care  
from \_\_\_\_\_ to \_\_\_\_\_ and is able  
to return to school on \_\_\_\_\_

LIMITATIONS/REMARKS:

Leave from work  
6/18/87 to 6/19/87

Dr. El Masri / C. Smith LPK

## FAMILY PRACTICE

4143 Atlanta Highway  
Montgomery, Alabama 36109  
(205) 271-4503

Shepherd A. Odom, M.D., P.C.

David El-Masri, M.D.

Barnes, Ken has been under my care and is able  
to return to work/school on Thurs 1 Sep 88  
seen @ Dr Odom's office 30 Aug 88  
Sinusitis

Dr. Odom

Date 8-30-88

Mr. L. B. Brown  
B. L. Brown

CENTRAL ALABAMA MEDICAL CENTER  
1201 Company St., Wetumpka, Al. 36092 567-4311

For James Barnes Age \_\_\_\_\_  
Address \_\_\_\_\_ Date 9-16-90

R

Please restrict Mr. Barnes to light duty only. No heavy lifting due to a back injury that was treated in our emergency room on 9-16-90 through 9-21-90

ER Director

507-4313

Do Not Substitute  
Substitution Allowed

DEA No. \_\_\_\_\_ Ala. Reg. # \_\_\_\_\_

☐ PLEASE LABEL

REPT. UT. DICT. 1 2 3 4 5 TIMES P.R.N. ☐ NON-REP. ☐ :  
TAKE TO THE DRUG STORE OF YOUR CHOICE

AM-PD 1

CARLTON G. KING, D.M.D., P.A.

5731 WOODMERE BOULEVARD  
MONTGOMERY, ALABAMA 36117

TELEPHONE 277-5401

DEA REG. NO. AK5677983  
LIC. NO. 3050CS

NAME

Ken Barnes

AGE

ADDRESS

DATE

9/30/88

R

Ken had 2 teeth extracted  
today.☐ LABEL

REFILL \_\_\_\_\_ TIMES

D.M.D.

PRODUCT SELECTION PERMITTED

DISPENSE AS WRITTEN

CARLTON G. KING, D.M.D., P.A.

5731 WOODMERE BOULEVARD  
MONTGOMERY, ALABAMA 36117

TELEPHONE 277-5401

DEA REG. NO. AK5677983  
LIC. NO. 3050CS

NAME

Ken Barnes

AGE

ADDRESS

DATE

8/29/88

R

Ken Barnes was a patient here  
today at 3:40☐ LABEL

REFILL \_\_\_\_\_ TIMES

D.M.D.

PRODUCT SELECTION PERMITTED

DISPENSE AS WRITTEN

TELEPHONE 277-5401

KING, L  
5731 WOODMERE BOULEVARD  
MONTGOMERY, ALABAMA 36117DEA REG. NO. AK5677983  
LIC. NO. 3050CS

NAME

Ken Barnes

ADDRESS

DATE

7/21/88

AGE

R Ken was seen in

our office today for an emergency

exam - we referred him on to

Dr. Hightower today -

REFILL

TIMES

☐ LABEL

## RETURN TO WORK AUTHORIZATION

DONALD A. MARSHALL AND C. KIRVEN ULMER, M.D.

1801 Pine Street, Suite 101 • Montgomery, Alabama 36106

269-9026 • 293-8000

Date

8-27-91

This is to certify that

James Barnes

has now recovered sufficiently to be able to return to (light) (regular) work duties on

8/29/91

Restrictions:

Pt was seen in our office and  
was diagnosed with gastroenteritis and  
Remarks: is medically excused from work until  
thru 8/29/91

Dr.

C. Kirven Ulmer MD

## RETURN TO WORK AUTHORIZATION

DONALD A. MARSHALL AND C. KIRVEN ULMER, M.D.

1801 Pine Street, Suite 101 • Montgomery, Alabama 36106

269-9026 • 293-8000

Date

6/28/91

This is to certify that

Ken Barnes

has now recovered sufficiently to be able to return to (light) (regular) work duties on

Restrictions:

May not return to work until  
Friday 6-28-91 due to lumbar back strain

Remarks:

Dr.

Kirven Ulmer MD

## RETURN TO WORK AUTHORIZATION



DONALD A. MARSHALL AND C. KIRVEN ULMER, M.D.

1801 Pine Street, Suite 101 • Montgomery, Alabama 36106  
269-9026 • 293-8000

Date 10/18/98

This is to certify that

James Barnes

has now recovered sufficiently to be able to return to (light) (regular) work duties on 10/19/98

Restrictions: \_\_\_\_\_

Remarks: \_\_\_\_\_

Dx: Frontal Sinusitis

CKU-005 (5/90) ADHS / Montgomery, AL / 272-8781

Dr. \_\_\_\_\_

Ulmer MD/BR

## MEMORANDUM

**TO:** Mr. Ken Barnes

**FROM:** Mr. Terry H. Gaddis, Director  
City Shops Department

**DATE:** 15 May 2002

**SUBJECT:** Assigned Vehicle/Unit(s)

This letter is in compliance with Operating Instruction No. 21 – Care and Maintenance of Department vehicles.

The following Small Fork Lift(s), 4800-1312, are being assigned to you as primary provider for care and maintenance, effective 15 May 2002. The unit(s) assigned to you will be inspected once a week to determine compliance with the Operating Instructions. Items such as gear shift knobs, turn signal, knobs, tire pressure, wiper blades, upholstery, exterior and interior cleanliness, lights, etc., will be of particular importance, as are the other requirements in the Operating Instruction.

Should, during the course of a follow-up inspection by the Director, Assistant Director or Foreman, it is found that items are missing, broken, not functioning, or in a state of neglect, you will be held peculiarly liable for the cost to repair or replace the items. Therefore, it is in your best interest to carefully inspect the vehicle/unit assigned to you and have any discrepancy repaired.

Additionally, a checklist is available in the Vehicle Administration Office, which will be used during your inspection. This checklist will be turned-in to your Foreman upon completion of your inspection/work. After the Foreman's review, he will forward the checklist to the Assistant Director for his review prior to filing by the clerk. If discrepancies are found during your inspection, the Foreman will forward a copy of the checklist to the Production Controller so a repair order can be initiated to make repairs. The day of the week you make your inspection is an individual choice; however, if you are not the primary operator of the vehicle, coordinate the time and availability with the primary operator. A vacuum cleaner is available outside the paint booth for keeping the interior of the vehicle clean – use it.

The Foreman of your Division will randomly inspect this vehicle to ensure compliance. Our vehicles are very expensive and essential for accomplishing the mission of our Department, so take the pride and responsibility in maintaining your assigned vehicle to the highest standards.

cc: Mr. Royce Albright, Foreman  
Auto Light Equipment Division

M E M O R A N D U M

TO: Mr. James K. Barnes #362

FROM: Mr. Terry H. Gaddis, Director  
City Shops Department

DATE: 16 February 1996

SUBJECT: Assigned Vehicle/Unit(s)

This letter is in compliance with Operating Instruction No. 21-- Care and Maintenance of Department vehicles.

The following Vehicle, 4800-1312, is being assigned to you, effective 20 February 1996, for care and maintenance. The unit(s) assigned to you will be inspected once a week to determine compliance with the Operating Instructions. Items such as gear shift knobs, turn signal knobs, tire pressure, wiper blades, upholstery, exterior and interior cleanliness, lights, etc., will be of particular importance, as are the other requirements in the Operating Instruction.

Should during the course of a follow-up inspection by the Director or Assistant Director, it is found that items are missing, broken, not functioning, or in a state of neglect, you will be held peculiarly liable for the cost to repair or replace the items. Therefore, it is in your best interest to carefully inspect the vehicle/unit assigned to you and have any discrepancy repaired.

Additionally, a checklist is available in the Administration Office, which will be used during your inspection. This checklist will be turned-in either to the Director or Assistant Director upon completion of your inspection/work. Day of the week is an individual choice; however, if you are not the primary operator of the vehicle, coordinate the time and availability with the primary operator. A vacuum cleaner is available outside the paint booth for keeping the interior of the vehicle clean -- use it.

The Foreman of your Division will also inspect this vehicle to ensure compliance. Our vehicles are very expensive and essential for accomplishing the mission of our Department, so take the pride and responsibility in maintaining your assigned vehicle to the highest standards, and let's set a goal to ensure our City Shops vehicles "OUTSHINE" all other Departments!

cc: Mr. Thessalonika Kendrick, Foreman  
Auto/Light Truck Division



FORM 5

Submit in Triplicate

**CITY AND COUNTY OF MONTGOMERY  
PERSONNEL DEPARTMENT  
PERSONNEL REQUISITION, CERTIFICATION, AND APPOINTMENT**

**REQUISITION**

To: Personnel Department

Date 8-31-83

Please certify the names of persons eligible for the following position:

Title	Compensation	Temporary	Permanent
AUTO MECHANIC-SMALL GAS ENGINES	\$13,345		
	\$513.12		

( ☒ ) Replacement of John W. Johnson  
 ( ) New Position

Date 9/8/83

Signature

Appointing Authority

Funds are available

Disbursing Officer

Date SEP 09 1983**CERTIFICATION TO:**

GARAGE AND SHOPS

In response to your request, the names of the following persons who are eligible for appointment are hereby certified. In making appointments, it is advisable, though not essential, that you interview all eligible persons certified.

Name	Address	Phone	Age	Grade
------	---------	-------	-----	-------

**APPOINTMENT**

TO: Personnel Department

From Garage

Department

From the certification above, the following person has been appointed:

Name	Effective Date	Temporary	Permanent
James K. Barnes	9/27/83		XX

Appointed by

Appointing Authority

Date SEP 09 1983

Donald R. Hayes

Department Head

Date 9/8/83

Approved by

Personnel Director

Date 9/12/83

## AUTOMOTIVE MECHANIC

NATURE OF WORK

This is skilled mechanical work of the journeyman level in the maintenance and repair of automotive and related equipment, requiring a high degree of technical ability as this relates to motor or major assembly rebuilding.

The work requires more than average ability for speedy and quick performance in automotive repair work on automobiles, buses, trucks, and similar equipment. Employees work under general direction and supervision and are expected to exercise independent judgment as to the method of repair after receiving written or oral instructions concerning the operating condition of a piece of equipment. Work may be inspected or tested by a foreman after work is completed.

EXAMPLES OF WORK (Any one position may not include all of the duties listed nor do the listed examples include all tasks which may be found in positions of this class.)

Rebuilds gasoline and diesel engines, air compressors, door engines and door valves, fitting and adjusting bearings and timing valves.

Tests and adjusts engines, fuel injection system, fuel or oil-supply pump and governor.

Rebuilds rear ends and other assemblies on automobiles, buses, trucks, and similar equipment, including transmissions, differentials, drive lines and clutches.

Keeps simple records of work performed.

Performs related work as required.

REQUIREMENTS OF WORK

Ability to perform heavy lifting and other strenuous physical task over extended periods of time.

Ability to diagnose defects in and repair automotive equipment.

Ability to understand and effectively carry out oral and written instructions.

Ability to establish and maintain effective working relationships with other employees.

Ability to secure a chauffeur's license.

Considerable knowledge of the methods, materials, tools and standard practices of the automotive mechanic's trade.

Considerable knowledge of the principles of operation of internal combustion engines.

Considerable knowledge of the hazards and safety precautions of the trade.

Skill in the care and use of tools employed in all phases of automotive repair and maintenance.

DESIRABLE EXPERIENCE AND TRAINING

Considerable experience as a journeyman automotive mechanic or completion of a recognized apprenticeship in this work; and completion of the tenth school grade.

CHECKLIST FOR PROCESSING NEW EMPLOYEE

☒ CONFIDENTIAL EMPLOYEE HISTORY FOLDER  
☒ COPY OF JOB DESCRIPTION  
362 ☒ ASSIGNED DUTY HOURS FORM  
☒ ASSIGN TIME CARD (USE RADIO CALL/TOOL CHIT NUMBER) # 362  
☒ (1) LOCATOR CARD\*  
☒ 2 3 x 5 CARDS (1 FOR ALPHABETICAL CARD FILE, 1 FOR MERIT INCREASE FILE)  
N/A (1) W-4 FEDERAL TAX FORM\*  
N/A (1) A-4 STATE TAX FORM\*  
N/A (1) TRAVELER'S SUPPLEMENTAL INSURANCE CARD (YELLOW)  
N/A (1) RETIREMENT MEMBERSHIP FORM  
☒ (1) PASS TO CITY LOT (NIGHT-DAY PHONE NUMBER)  
N/A (1) BLUE CROSS HOSPITALIZATION APPLICATION CARD (WHITE)  
N/A (1) EMPLOYEE ACTIVITY CARD (BLUE)  
N/A (1) BLUE CROSS BENEFITS BOOKLET  
☒ DRIVERS LICENSE NUMBER 3116609 EXPIRATION DATE 09/02/87  
☒ EMPLOYEE READS OPERATING INSTRUCTIONS AND SIGN OI CARD  
CLOTHING SIZES: PANTS: W \_\_\_\_\_ L \_\_\_\_\_; SHIRTS: 16  
☒ PERSONNEL HISTORY FORM  
N/A PAYROLL COMPUTER NEW HIRE INPUT FORMS  
N/A PAYROLL COMPUTER INSURANCE HISTORY FORM  
☒ ADMINISTRATIVE OFFICE WILL CONTACT SAFETY SUPERVISOR AT EXT. 368 FOR EMPLOYEE TO BE SCHEDULED FOR CITY DRIVER'S LICENSE  
☒ EMPLOYEE IDENTIFICATION CARD FOR FUEL SYSTEM # 628

James K. Barnes Auto Mechanic /  
NAME POSITION Auto Light / Truck 9/27/83  
DATE PROCESSED

\*Make 1 photocopy of each and place in Personnel Folder

DATA FOR PAY ROLL

#

1. NAME: Barnes, James K.

2. SOCIAL SECURITY NO. 4 2 0 7 6 7 8 9 8

3. HOME PHONE NO. <sup>205</sup> 5 6 7 - 4 3 0 - 7 4197

4. SPOUSE'S NAME: JUE OWENS BARNES

5. FATHER'S NAME: Jim Robinson

6. MOTHER'S MAIDEN NAME: MAY NELL ROBINSON

7. WORK ASSIGNMENT: Auto Mech. - Snow Clearing DATE: 09-27-88

8. DIVISION: AU

9. SHIFT: 0700 - 1530

10. DATE OF LAST PHYSICAL 4-18-82

11. HEIGHT: FEET 5 INCHES 8 WEIGHT: POUNDS 198

12. BLOOD TYPE     

## IN CASE OF EMERGENCY, NOTIFY:

1. NAME May Nell Robinson RELATIONSHIP ~~WIFE~~ M

PHONE # 205 - 272 9133

OTHER #     

2. NAME Gail Barnes RELATIONSHIP ~~WIFE~~ J

PHONE # 834 - 9914

OTHER #     

## RELATIONSHIP CODES:

CODE	DESCRIPTION
A	AUNT
B	BROTHER
C	CHILD
F	FATHER
G	GUARDIAN
H	HUSBAND
M	MOTHER
O	OTHER
S	SISTER
U	UNCLE
W	WIFE

STATE OF ALABAMA       )  
COUNTY OF MONTGOMERY )

AGREEMENT

THIS AGREEMENT made this the 21st day of February,  
19 85, James K. Barnes, an employee of the  
City of Montgomery, Department of Garage and Shops (hereinafter  
referred to as "purchaser") and the City of Montgomery,  
Alabama, a municipal corporation (hereinafter referred to as  
"City") witnesseth:

WHEREAS, the City is desirous that its employees in the  
Department of Garage and Shops purchase and retain ownership  
of mechanics' tool sets so that said tools can and will be  
used by such employees in carrying out their job with the  
City; and

WHEREAS, the purchaser is a mechanic employed by the  
City of Montgomery, Department of Garage and Shops and is  
desirous of purchasing from the City of Montgomery a tool  
set; and

WHEREAS, the purchaser intends and requests that the  
City deduct a sum of \$20.00 bi-weekly from the purchaser's  
accumulated wages until such time as the indebtedness, subject  
to no interest, has been satisfied in the amount of \$2,944.59  
dollars; and

WHEREAS, the purchaser understands that the tool set  
and/or tools are not to be removed from the Garage and Shops  
Department until the entire indebtedness has been satisfied;  
and

WHEREAS, the superintendent of the Garage and Shops and/  
or his representative shall from time to time conduct a  
physical inventory of all tools; and

WHEREAS, if it is determined that any items are missing, such items shall be replaced at the expense of the purchaser; and

WHEREAS, in the event the purchaser's employment with the City of Montgomery is terminated either voluntarily or involuntarily before the indebtedness is satisfied, the tool set will be inventoried and any missing tools will be replaced from funds previously paid against the indebtedness by the purchaser and after the Superintendent of the Department of Garage and Shops is reasonably satisfied that all items have been replaced, the purchaser will be reimbursed the balance resulting from the sum total of his payments minus any deductions for the replacement of missing inventory; and

WHEREAS, if it is determined by the superintendent of the Department of Garage and Shops that the purchaser is undergoing a legitimate hardship and is unable to continue payment against his indebtedness for the tools he shall have the option of assigning the balance of the indebtedness with title to the tools to another employee of the Department of Garage and Shops willing to accept the indebtedness or he may assign the tools and the balance of the indebtedness back to the Department of Garage and Shops.

NOW THEREFORE, IN CONSIDERATION of \$2,944.59 Dollars, and other valuable consideration in hand paid by the purchaser and the City, the receipt and sufficiency of which is hereby acknowledged, it is understood and agreed by the parties as follows:

1. The purchaser shall be issued a set of tools with an inventory of said tools to be attached as Exhibit "A" and incorporated herein as a part of this agreement.

2. The purchaser hereby agrees to incur an indebtedness for such tools in the amount of \$2,944.59 Dollars and hereby authorizes the Department of Finance for the City of Montgomery

to deduct bi-weekly payments in the amount of (\$20.00) Twenty Dollars from his accumulated wages bi-weekly.

3. It is understood and agreed that until the indebtedness is satisfied the City of Montgomery shall retain complete ownership to all tools and the purchaser is responsible for any inventory loss.

4. It is also understood and agreed that one of the purposes for the City of Montgomery to enter into this agreement is so that the employee will use the tools purchased under the agreement to fulfill his job with the City and that if the employee fails to use the tools accordingly prior to satisfying the indebtedness, this agreement is terminated and full possession of the tools reverts to the City.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed on the date first above written.

This contract combines and replaces all previous contracts signed by Mr. Barnes. Combined amount \$1,729.59, total \$2,944.59:

Cheryl Stephens  
WITNESS

James K. Barnes  
Employee, Department of Garage  
and Shops

William H. Jones  
WITNESS

Donald R. Hayes  
Donald R. Hayes, Superintendent  
Department of Garage and Shops





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Cheryl Stephens  
WITNESS

James K. Barnes  
Employee, Department of Garage  
and Shops

William H. Jones  
WITNESS

Donald R. Hayes  
Donald R. Hayes, Superintendent  
Department of Garage and Shops

MEMORANDUM

Tools Bought on Garage Tool Program

Purchase Order #54701

Date: January 22, 1985

## Inventory:

1 each	#9RY65034N	Sears Tools Box	\$ 525.00
1 set	#9RY4362	Crow Boot	30.00
1 set	#9RY4342	Regular Socket	12.85
1 set	#9RY44438	Deep Socket	21.00
1 set	#9RY43812	Socket	25.50
1 set	#9RY4967	Metric Wrench	60.00
1 set	#9RY46283	Hex Key Set	3.25
1 set	#9RY46696	Hex Set	6.00
1 set	9GT43036	Punch Set	21.50
1 each	9GT42892	Wedge Bar	9.50
1 each	9GT4283	Pry Bar	7.70
1 each	9RY6567	Cutter	19.70
1 each	9RY4319	Cotter Key Puller	3.68
1 set	9RY4159	Screwdriver Set	25.70
1 set	9RY41401	Torx Driver	12.85
1 set	9RY4196	Nut Driver	17.00
1 each	9GT30844	Pipe Wrench	25.70
1 each	9RY95072	Knife	10.20
1 each	9RY38467	Hammer	12.85
1 each	9GT7473	Rivetor	18.85
1 set	9GT52151	Tap and Dies	109.00
1 each	9GT45164	Stethoscope	7.70
1 each	9GT46905	Puller	17.00
1 each	9GT46906	Puller	30.00
1 each	9GT6092	Electric Tool	10.20
1 each	9GT61002	Power Tool	34.00
1 each	9GT25008	Cutter	3.25
1 each	9GT25031	Polishing Comp.	1.45
1 each	9GT25033	Polishing Wheel	1.45
1 set	9GT25025	Cutting Wheel	3.25
1 set	9RY6819	Drill Set	42.86
1 each	9RY1004	Drill	34.20
1 set	9RY20616	Extension & Bit	12.00
1 set	9RY45279	Piers	18.85
1 each	9RY38461	Hammer	8.50
1 each	9RY38465	Hammer	10.20
1 each	9GT47641	Hand Impact	14.50
1 each	9GT47626	Harmonic Puller	12.85
1 each	9GT4133	Magnetic Pick-up	3.40
1 set	9RY67063	Stop Collar Set	8.50
1 each	9RY2791	Drill Cordless	120.00
1 each	9GT82391	AC-DC Tester	79.00
		Total - -	\$1,450.99

PARTS LIST FOR 575 PC. MECHANICS TOOL SET NO. 46385

CATALOG NO.	DESCRIPTION	SIZE-DRIVE	CATALOG NO.	DESCRIPTION	SIZE-DRIVE
43501	Socket 6 PL. Mtl. Dp.	4mm	43571	Socket 6 PL. Dp.	3/16
43502	Socket 6 PL. Mtl. Dp.	5mm	43572	Socket 6 PL. Dp.	1/4
43503	Socket 6 PL. Mtl. Dp.	7mm	43573	Socket 6 PL. Dp.	5/16
43504	Socket 6 PL. Mtl. Dp.	9mm	43574	Socket 6 PL. Dp.	3/8
43505	Socket 6 PL. Mtl. Dp.	4mm	43575	Socket 6 PL. Dp.	11/32
43506	Socket 6 PL. Mtl. Dp.	5mm	43576	Socket 6 PL. Dp.	3/8
43507	Socket 6 PL. Mtl. Dp.	9mm	43577	Socket 6 PL. Dp.	3/8
43508	Socket 6 PL. Mtl. Dp.	10mm	43578	Socket 6 PL. Dp.	7/16
43509	Socket 6 PL. Mtl. Dp.	12mm	43579	Socket 6 PL. Dp.	1/2
43510	Socket 6 PL. Mtl. Dp.	13mm	43580	Socket 6 PL. Dp.	1/2
43511	Socket 6 PL. Mtl. Dp.	14mm	43581	Socket 6 PL. Dp.	1/2
43512	Socket 6 PL. Mtl. Dp.	14mm	43582	Socket 6 PL. Dp.	1/2
43513	Socket 6 PL. Mtl. Dp.	12mm	43583	Socket 6 PL. Dp.	1/2
43514	Socket 6 PL. Mtl.	13mm	43584	Socket 6 PL. Dp.	1/2
43515	Socket 6 PL. Mtl. Dp.	11mm	43585	Socket 6 PL. Dp.	1/2
43516	Socket 6 PL. Mtl. Dp.	10mm	43586	Socket 6 PL. Dp.	1/2
43517	Socket 6 PL. Mtl. Dp.	9mm	43587	Socket 6 PL. Dp.	1/2
43518	Socket 6 PL. Mtl. Dp.	8mm	43588	Socket 6 PL. Dp.	1/2
43519	Socket 6 PL. Mtl. Dp.	7mm	43589	Socket 6 PL. Dp.	1/2
43520	Socket 6 PL. Mtl. Dp.	6mm	43590	Socket 6 PL. Dp.	1/2
43521	Socket 6 PL. Mtl. Dp.	5mm	43591	Socket 6 PL. Dp.	1/2
43522	Socket 6 PL. Mtl. Dp.	4mm	43592	Socket 6 PL. Dp.	1/2
43523	Socket 6 PL. Mtl. Dp.	3mm	43593	Socket 6 PL. Dp.	1/2
43524	Socket 6 PL. Mtl. Dp.	2mm	43594	Socket 6 PL. Dp.	1/2
43525	Socket 6 PL. Mtl. Dp.	1mm	43595	Socket 6 PL. Dp.	1/2
43526	Socket 6 PL. Mtl. Dp.	1mm	43596	Socket 6 PL. Dp.	1/2
43527	Socket 6 PL. Mtl. Dp.	1mm	43597	Socket 6 PL. Dp.	1/2
43528	Socket 6 PL. Mtl. Dp.	1mm	43598	Socket 6 PL. Dp.	1/2
43529	Socket 6 PL. Mtl. Dp.	1mm	43599	Socket 6 PL. Dp.	1/2
43530	Socket 6 PL. Mtl. Dp.	1mm	43600	Socket 6 PL. Dp.	1/2
43531	Socket 6 PL. Mtl. Dp.	1mm	43601	Socket 6 PL. Dp.	1/2
43532	Socket 6 PL. Mtl. Dp.	1mm	43602	Socket 6 PL. Dp.	1/2
43533	Socket 6 PL. Mtl. Dp.	1mm	43603	Socket 6 PL. Dp.	1/2
43534	Socket 6 PL. Mtl. Dp.	1mm	43604	Socket 6 PL. Dp.	1/2
43535	Socket 6 PL. Mtl. Dp.	1mm	43605	Socket 6 PL. Dp.	1/2
43536	Socket 6 PL. Mtl. Dp.	1mm	43606	Socket 6 PL. Dp.	1/2
43537	Socket 6 PL. Mtl. Dp.	1mm	43607	Socket 6 PL. Dp.	1/2
43538	Socket 6 PL. Mtl. Dp.	1mm	43608	Socket 6 PL. Dp.	1/2
43539	Socket 6 PL. Mtl. Dp.	1mm	43609	Socket 6 PL. Dp.	1/2
43540	Socket 6 PL. Mtl. Dp.	1mm	43610	Socket 6 PL. Dp.	1/2
43541	Socket 6 PL. Mtl. Dp.	1mm	43611	Socket 6 PL. Dp.	1/2
43542	Socket 6 PL. Mtl. Dp.	1mm	43612	Socket 6 PL. Dp.	1/2
43543	Socket 6 PL. Mtl. Dp.	1mm	43613	Socket 6 PL. Dp.	1/2
43544	Socket 6 PL. Mtl. Dp.	1mm	43614	Socket 6 PL. Dp.	1/2
43545	Socket 6 PL. Mtl. Dp.	1mm	43615	Socket 6 PL. Dp.	1/2
43546	Socket 6 PL. Mtl. Dp.	1mm	43616	Socket 6 PL. Dp.	1/2
43547	Socket 6 PL. Mtl. Dp.	1mm	43617	Socket 6 PL. Dp.	1/2
43548	Socket 6 PL. Mtl. Dp.	1mm	43618	Socket 6 PL. Dp.	1/2
43549	Socket 6 PL. Mtl. Dp.	1mm	43619	Socket 6 PL. Dp.	1/2
43550	Socket 6 PL. Mtl. Dp.	1mm	43620	Socket 6 PL. Dp.	1/2
43551	Socket 6 PL. Mtl. Dp.	1mm	43621	Socket 6 PL. Dp.	1/2
43552	Socket 6 PL. Mtl. Dp.	1mm	43622	Socket 6 PL. Dp.	1/2
43553	Socket 6 PL. Mtl. Dp.	1mm	43623	Socket 6 PL. Dp.	1/2
43554	Socket 6 PL. Mtl. Dp.	1mm	43624	Socket 6 PL. Dp.	1/2
43555	Socket 6 PL. Mtl. Dp.	1mm	43625	Socket 6 PL. Dp.	1/2
43556	Socket 6 PL. Mtl. Dp.	1mm	43626	Socket 6 PL. Dp.	1/2
43557	Socket 6 PL. Mtl. Dp.	1mm	43627	Socket 6 PL. Dp.	1/2
43558	Socket 6 PL. Mtl. Dp.	1mm	43628	Socket 6 PL. Dp.	1/2
43559	Socket 6 PL. Mtl. Dp.	1mm	43629	Socket 6 PL. Dp.	1/2
43560	Socket 6 PL. Mtl. Dp.	1mm	43630	Socket 6 PL. Dp.	1/2
43561	Socket 6 PL. Mtl. Dp.	1mm	43631	Socket 6 PL. Dp.	1/2
43562	Socket 6 PL. Mtl. Dp.	1mm	43632	Socket 6 PL. Dp.	1/2
43563	Socket 6 PL. Mtl. Dp.	1mm	43633	Socket 6 PL. Dp.	1/2
43564	Socket 6 PL. Mtl. Dp.	1mm	43634	Socket 6 PL. Dp.	1/2
43565	Socket 6 PL. Mtl. Dp.	1mm	43635	Socket 6 PL. Dp.	1/2
43566	Socket 6 PL. Mtl. Dp.	1mm	43636	Socket 6 PL. Dp.	1/2
43567	Socket 6 PL. Mtl. Dp.	1mm	43637	Socket 6 PL. Dp.	1/2
43568	Socket 6 PL. Mtl. Dp.	1mm	43638	Socket 6 PL. Dp.	1/2
43569	Socket 6 PL. Mtl. Dp.	1mm	43639	Socket 6 PL. Dp.	1/2
43570	Socket 6 PL. Mtl. Dp.	1mm	43640	Socket 6 PL. Dp.	1/2
43571	Socket 6 PL. Mtl. Dp.	1mm	43641	Socket 6 PL. Dp.	1/2
43572	Socket 6 PL. Mtl. Dp.	1mm	43642	Socket 6 PL. Dp.	1/2
43573	Socket 6 PL. Mtl. Dp.	1mm	43643	Socket 6 PL. Dp.	1/2
43574	Socket 6 PL. Mtl. Dp.	1mm	43644	Socket 6 PL. Dp.	1/2
43575	Socket 6 PL. Mtl. Dp.	1mm	43645	Socket 6 PL. Dp.	1/2
43576	Socket 6 PL. Mtl. Dp.	1mm	43646	Socket 6 PL. Dp.	1/2
43577	Socket 6 PL. Mtl. Dp.	1mm	43647	Socket 6 PL. Dp.	1/2
43578	Socket 6 PL. Mtl. Dp.	1mm	43648	Socket 6 PL. Dp.	1/2
43579	Socket 6 PL. Mtl. Dp.	1mm	43649	Socket 6 PL. Dp.	1/2
43580	Socket 6 PL. Mtl. Dp.	1mm	43650	Socket 6 PL. Dp.	1/2
43581	Socket 6 PL. Mtl. Dp.	1mm	43651	Socket 6 PL. Dp.	1/2
43582	Socket 6 PL. Mtl. Dp.	1mm	43652	Socket 6 PL. Dp.	1/2
43583	Socket 6 PL. Mtl. Dp.	1mm	43653	Socket 6 PL. Dp.	1/2
43584	Socket 6 PL. Mtl. Dp.	1mm	43654	Socket 6 PL. Dp.	1/2
43585	Socket 6 PL. Mtl. Dp.	1mm	43655	Socket 6 PL. Dp.	1/2
43586	Socket 6 PL. Mtl. Dp.	1mm	43656	Socket 6 PL. Dp.	1/2
43587	Socket 6 PL. Mtl. Dp.	1mm	43657	Socket 6 PL. Dp.	1/2
43588	Socket 6 PL. Mtl. Dp.	1mm	43658	Socket 6 PL. Dp.	1/2
43589	Socket 6 PL. Mtl. Dp.	1mm	43659	Socket 6 PL. Dp.	1/2
43590	Socket 6 PL. Mtl. Dp.	1mm	43660	Socket 6 PL. Dp.	1/2
43591	Socket 6 PL. Mtl. Dp.	1mm	43661	Socket 6 PL. Dp.	1/2
43592	Socket 6 PL. Mtl. Dp.	1mm	43662	Socket 6 PL. Dp.	1/2
43593	Socket 6 PL. Mtl. Dp.	1mm	43663	Socket 6 PL. Dp.	1/2
43594	Socket 6 PL. Mtl. Dp.	1mm	43664	Socket 6 PL. Dp.	1/2
43595	Socket 6 PL. Mtl. Dp.	1mm	43665	Socket 6 PL. Dp.	1/2
43596	Socket 6 PL. Mtl. Dp.	1mm	43666	Socket 6 PL. Dp.	1/2
43597	Socket 6 PL. Mtl. Dp.	1mm	43667	Socket 6 PL. Dp.	1/2
43598	Socket 6 PL. Mtl. Dp.	1mm	43668	Socket 6 PL. Dp.	1/2
43599	Socket 6 PL. Mtl. Dp.	1mm	43669	Socket 6 PL. Dp.	1/2
43600	Socket 6 PL. Mtl. Dp.	1mm	43670	Socket 6 PL. Dp.	1/2
43601	Socket 6 PL. Mtl. Dp.	1mm	43671	Socket 6 PL. Dp.	1/2
43602	Socket 6 PL. Mtl. Dp.	1mm	43672	Socket 6 PL. Dp.	1/2
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43629	Socket 6 PL. Mtl. Dp.	1mm	43699	Socket 6 PL. Dp.	1/2
43630	Socket 6 PL. Mtl. Dp.	1mm	43700	Socket 6 PL. Dp.	1/2
43631	Socket 6 PL. Mtl. Dp.	1mm	43701	Socket 6 PL. Dp.	1/2
43632	Socket 6 PL. Mtl. Dp.	1mm	43702	Socket 6 PL. Dp.	1/2
43633	Socket 6 PL. Mtl. Dp.	1mm	43703	Socket 6 PL. Dp.	1/2
43634	Socket 6 PL. Mtl. Dp.	1mm	43704	Socket 6 PL. Dp.	1/2
43635	Socket 6 PL. Mtl. Dp.	1mm	43705	Socket 6 PL. Dp.	1/2
43636	Socket 6 PL. Mtl. Dp.	1mm	43706	Socket 6 PL. Dp.	1/2
43637	Socket 6 PL. Mtl. Dp.	1mm	43707	Socket 6 PL. Dp.	1/2
43638	Socket 6 PL. Mtl. Dp.	1mm	43708	Socket 6 PL. Dp.	1/2
43639	Socket 6 PL. Mtl. Dp.	1mm	43709	Socket 6 PL. Dp.	1/2
43640	Socket 6 PL. Mtl. Dp.	1mm	43710	Socket 6 PL. Dp.	1/2
43641	Socket 6 PL. Mtl. Dp.	1mm	43711	Socket 6 PL. Dp.	1/2
43642	Socket 6 PL. Mtl. Dp.	1mm	43712	Socket 6 PL. Dp.	1/2
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43644	Socket 6 PL. Mtl. Dp.	1mm	43714	Socket 6 PL. Dp.	1/2
43645	Socket 6 PL. Mtl. Dp.	1mm	43715	Socket 6 PL. Dp.	1/2
43646	Socket 6 PL. Mtl. Dp.	1mm	43716	Socket 6 PL. Dp.	1/2
43647	Socket 6 PL. Mtl. Dp.	1mm	43717	Socket 6 PL. Dp.	1/2
43648	Socket 6 PL. Mtl. Dp.	1mm	43718	Socket 6 PL. Dp.	1/2
43649	Socket 6 PL. Mtl. Dp.	1mm	43719	Socket 6 PL. Dp.	1/2
43650	Socket 6 PL. Mtl. Dp.	1mm	43720	Socket 6 PL. Dp.	1/2
43651	Socket 6 PL. Mtl. Dp.	1mm	43721	Socket 6 PL. Dp.	1/2
43652	Socket 6 PL. Mtl. Dp.	1mm	43722	Socket 6 PL. Dp.	1/2
43653	Socket 6 PL. Mtl. Dp.	1mm	43723	Socket 6 PL. Dp.	1/2
43654	Socket 6 PL. Mtl. Dp.	1mm	43724	Socket 6 PL. Dp.	1/2
43655	Socket 6 PL. Mtl. Dp.	1mm	43725	Socket 6 PL. Dp.	1/2
43656	Socket 6 PL. Mtl. Dp.	1mm	43726	Socket 6 PL. Dp.	1/2
43657	Socket 6 PL. Mtl. Dp.	1mm	43727	Socket 6 PL. Dp.	1/2
43658	Socket 6 PL. Mtl. Dp.	1mm	43728	Socket 6 PL. Dp.	1/2
43659	Socket 6 PL. Mtl. Dp.	1mm	43729	Socket 6 PL. Dp.	1/2
43660	Socket 6 PL. Mtl. Dp.	1mm	43730	Socket 6 PL. Dp.	1/2
43661	Socket 6 PL. Mtl. Dp.	1mm	43731	Socket 6 PL. Dp.	1/2
43662	Socket 6 PL. Mtl. Dp.	1mm	43732	Socket 6 PL. Dp.	1/2
43663	Socket 6 PL. Mtl. Dp.	1mm	43733	Socket 6 PL. Dp.	1/2
43664	Socket 6 PL. Mtl. Dp.	1mm	43734	Socket 6 PL. Dp.	1/2
43665	Socket 6 PL. Mtl. Dp.	1mm	43735	Socket 6 PL. Dp.	1/2
43666	Socket 6 PL. Mtl. Dp.	1mm	43736	Socket 6 PL. Dp.	1/2
43667	Socket 6 PL. Mtl. Dp.	1mm	43737	Socket 6 PL. Dp.	1/2
43668	Socket 6 PL. Mtl. Dp.	1mm	43738	Socket 6 PL. Dp.	1/2
43669	Socket 6 PL. Mtl. Dp.	1mm	43739	Socket 6 PL. Dp.	1/2
43670	Socket 6 PL. Mtl. Dp.	1mm	43740	Socket 6 PL. Dp.	1/2
43671	Socket 6 PL. Mtl. Dp.	1mm	43741	Socket 6 PL. Dp.	1/2
43672	Socket 6 PL. Mtl. Dp.	1mm	43742	Socket 6 PL. Dp.	1/2
43673	Socket 6 PL. Mtl. Dp.	1mm	43743	Socket 6 PL. Dp.	1/2
43674	Socket 6 PL. Mtl. Dp.	1mm	43744	Socket 6 PL. Dp.	1/2
43675	Socket 6 PL. Mtl. Dp.	1mm	43745	Socket 6 PL. Dp.	1/2
43676	Socket 6 PL. Mtl. Dp.	1mm	43746	Socket 6 PL. Dp.	1/2
43677	Socket 6 PL. Mtl. Dp.	1mm	43747	Socket 6 PL. Dp.	1/2
43678	Socket 6 PL. Mtl. Dp.	1mm	43748	Socket 6 PL. Dp.	1/2
43679	Socket 6 PL. Mtl. Dp.	1mm	43749	Socket 6 PL. Dp.	1/2
43680	Socket 6 PL. Mtl. Dp.	1mm	43750	Socket 6 PL. Dp.	1/2
43681	Socket 6 PL. Mtl. Dp.	1mm	43751	Socket 6 PL. Dp.	1/2
43682	Socket 6 PL. Mtl. Dp.	1mm	43752	Socket 6 PL. Dp.	1/2
43683	Socket 6 PL. Mtl. Dp.	1mm	43753	Socket 6 PL. Dp.	1/2
43684	Socket 6 PL. Mtl. Dp.	1mm			